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HISTORY
OF
QUEEN CHARLOTTE'S
HOSPITAL.

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HER MOST GRACIOUS MAJESTY
THE LATE QUEEN CHARLOTTE,
Patron of the Hospital.

THE
HISTORY
OF
QUEEN CHARLOTTE'S
LYING-IN HOSPITAL,

FROM ITS FOUNDATION IN 1752
TO THE PRESENT TIME.

WITH AN ACCOUNT OF ITS
OBJECTS AND PRESENT STATE.

ILLUSTRATED BY PLANS AND ENGRAVINGS.

BY THOMAS RYAN,
SECRETARY TO THE HOSPITAL.

Dedicated by special permission to Her Majesty the Queen.

1885.

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ST. JOHN'S WOOD, N.W.



TO

Her Majesty the Queen,

THE MUNIFICENT PATRON OF INSTITUTIONS OF EVERY KIND HAVING
FOR THEIR OBJECT THE PROMOTION OF THE
WELFARE OF HER PEOPLE,

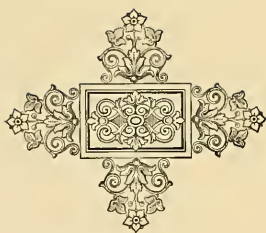
AND

ESPECIALLY OF CHARITIES FOR THE RELIEF OF THE SICK POOR,

This Volume is,

WITH HER MAJESTY'S GRACIOUS PERMISSION,

Most Respectfully and Dutifully Inscribed.





P R E F A C E.

THE following pages had their origin in enquiries which it was my duty to make last summer as to the situation and work of the Hospital during the early part of its existence. It had been decided in February, 1884, to petition Her Majesty the Queen to grant a Charter of Incorporation to the Hospital; and as the petition should embody a short account of the principal occurrences in the history of the Charity, the enquiries above referred to were made for the purpose of supplying missing links and verifying existing records. This work occupied much time, and so much incidental information relating to the past history of the Charity was gathered by the way, that my notes became considerable, and I deemed it worth while to spend a little more time in making them as far as possible complete. This I have succeeded in doing, and I now submit the result of these researches, with the addition of a short chapter on the work and condition of the Charity at the present time.

Very many of the facts and events herein described are not generally known, and some will, I have reason to believe, be quite new to most of my readers. I have used my best endeavours to be accurate, and have taken pains to record everything of interest that I have been able to discover in connection with the Hospital during the one hundred and thirty-three years of its existence.

I would call special attention to the Statistical Tables on pages 60 to 62, which will be found very instructive and interesting. The reader will observe the very rapid increase in the number of poor women relieved, and in the revenue and expenditure, during the period since the rebuilding of the Hospital in 1856, as compared with the preceding fifty years. These figures have mainly been collected from minute books and other manuscript records, as during the earlier years no Annual Report was published. They embrace the whole period from the re-constitution of the Hospital in 1809, previous to which date there is no existing record, that I have been able to discover, of the operations of the Charity.

The plans in the Appendix have been inserted for the purpose of showing (*a*) the position in the grounds, and the extent, of the old Manor House of Lisson Green, as compared with that of the new Hospital; (*b*) the sanitary arrangements and system of drainage of the Hospital as built in 1856, side by side with the alterations and improvements that have since been made in these important features; (*c*) the various structural additions and enlargements that have been made since 1856, and the extent of the new wing which is shortly to be built. These plans have no pretension to accuracy of detail; they were sketched by me for the purpose just described, and I hope they will serve that end sufficiently well.

I have to tender my most cordial thanks to all those who have assisted me in my enquiries, particularly when I remember that in many cases I have troubled them again and again. To those members of the Committee of Management who have aided me by their counsel and assistance my respectful acknowledgments are especially due, for their kind help has been of the greatest practical value.

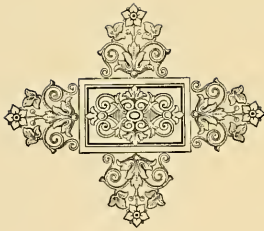
These few remarks are all that it is necessary for me to make. I hope that any faults or defects that may exist in the book will be

viewed with indulgence, as my aim has been to record facts rather than to strive after perfection either of style or arrangement. However great its imperfections or shortcomings may be, it must in a measure be deemed valuable and interesting by those who take an interest in the beneficent work in which Queen Charlotte's Hospital is engaged. If it results in increasing public interest in this old and important Charity, I shall have good reason to consider the time and labour spent upon it well employed.

QUEEN CHARLOTTE'S HOSPITAL,
MARYLEBONE ROAD, N.W.

August, 1885.







INTRODUCTION.

IT is an interesting fact that until the middle of the eighteenth century there were no Medical Charities in London of the class now known as Special Hospitals, unless we consider a Hospital for Lunatics—which is more properly an Asylum or Home—as one, the Bethlehem Hospital for Lunatics having been founded in 1546. In fact, Medical Charities of any kind were very few and far between, and one of the noblest characteristics of the eighteenth century is the great growth of organized voluntary effort for the relief and care of the sick. If we take the great general Hospitals of London, we shall find that two only, St. Bartholomew's and St. Thomas's, were established before the year 1700, and that, of the remainder, the largest and the most important, namely Guy's, The London, St. George's, Middlesex and Westminster, were founded in the eighteenth century. Special Hospitals, as I have already said, appeared at this time, and the first among them were the Lying-In Hospitals, all of which were founded between 1749 and 1765, a period of seventeen years. London was not the first town in the United Kingdom to possess a Lying-In Hospital, but was preceded in this particular by Dublin, where Dr. Bartholomew Mosse, an eminent physician, in spite of the strongest prejudices, persistent opposition, and malevolent misrepresentation, succeeded in opening a Lying-In Hospital in March, 1745. In the course of his practice in the city of Dublin he had been a constant witness of the misery and suffering of the poor women of that city, during their lying-in—misery and suffering which would scarcely have been credited by one who had not been an eye-witness of it. "Their lodgings were generally in cold garrets open to

“every wind, or in damp cellars subject to floods from excessive rain ; “destitute of attendance, medicine, and often of proper food, by which “hundreds perished with their little infants.”* The sight of so much distress excited his compassion, and he resolved to lose no time in attempting to establish a Lying-In Hospital, a resolution which as we have seen he carried into effect. He purchased a house for the purpose in George’s Lane, furnished it with beds and other necessaries, and supported it for a considerable period at his own expense. As time went on, however, its usefulness became so evident that other benevolent persons took an interest in the work and promoted it by their contributions. This encouraged Dr. Mosse to extend his operations, and after the most strenuous exertions, in the face of incredible obstacles placed in his way by his enemies, he succeeded in building a large and properly appointed Hospital, which was opened by the Duke of Bedford, then Lord-Lieutenant of Ireland, in the presence of a large company of nobility and gentry, at the close of the year 1757. The Rotunda Lying-In Hospital has continued the work thus commenced to the present day, and is now the largest and most important Lying-In Hospital in the United Kingdom, beside being with one exception the largest and oldest chartered School of Midwifery in the world. It is resorted to by students not only from all parts of Ireland, but from England, Scotland, and even from remote British Colonies, from America, France, and other countries.

In 1749, four years after the founding of the Dublin Lying-In Hospital, London followed the example thus set, and a Lying-In Hospital was opened in Brownlow Street, Long Acre. This was followed by the foundation of the City of London Lying-In Hospital at London House, Aldersgate Street, in 1750, the General Lying-In Hospital, Bayswater†, in 1752, and the Westminster Lying-In Hospital, Surrey Road, Westminster Bridge, in 1765. In addition to these a Lying-In Charity for delivering poor married women at their own habitations was instituted in 1757. These are the only London Lying-In Institutions now existing, which were established at the above period ; but many others were founded at that time which have since ceased to exist, and

* State of the Dublin Lying-In Hospital, 1750.

† Now Queen Charlotte’s Hospital.

there are several small Out-patient Maternities now in existence which are of comparatively recent date.

The Hospital in Brownlow Street was instituted in November, 1749, under the presidency of the Duke of Portland, and was first opened for the reception of patients on the 7th December of that year. There was no provision made for the delivery of patients at their own homes, but shortly after its foundation female pupils were received to be trained as Midwives. In 1756 its name was altered, and it was henceforth known as the British Lying-In Hospital. In 1849 it was rebuilt in Endell Street, St. Giles's, where it is now situated. There is now an out-patient department connected with it, but I am unable to state at what date this feature was introduced. At the present time it receives about 150 in-patients per annum, and attends about 550 at their own homes, at an annual expenditure of about £1,400.

The City of London Lying-In Hospital at London House, Aldersgate Street, was established on the 30th March, 1750; Slingsby Bethell, Esq., M.P., Alderman of the City of London, being its first President. It was first commenced at London House, in hired apartments, and had then for its objects both the reception of in-patients, and the delivery of out-patients at their own homes. It was removed to Shaftesbury House in the same street in the following year, and its scope was curtailed by the discontinuance of the out-patient department. Shaftesbury House in a few years proved to be too small for the increasing work, and the lease of a piece of ground at the corner of Old Street and the City Road having been granted by the Governors of St. Bartholomew's Hospital at a rental of £50 per annum, the building of a new Hospital was commenced. The foundation stone was laid on the 10th October, 1770, and the new Hospital was opened for the reception of patients on the 4th April, 1773. This building has continued to be the scene of the Charity's operations ever since. The delivery of out-patients at their own homes was not resumed till 1872, since which date about 1,100 out-patients have been attended at their own homes every year. The average number of in-patients has fallen off in recent years, and is now about 300. The

average annual expenditure is about £3,000. The Hospital receives pupils for training as Midwives and Monthly Nurses.

The Westminster Lying-In Hospital was instituted in 1765. It is described in "Highmore's Public Charities" as being near Westminster Bridge, and is marked in maps of London of that time as standing about 300 yards from the Bridge, by the side of the main road (corresponding with the present Westminster Bridge Road) leading to St. George's Fields. It was originally intended for the wives of poor industrious tradesmen, or distressed housekeepers, but the Governors having received many representations of the severe hardships sustained by unmarried women, "and reflecting on the numerous instances "where women of this description, overwhelmed with shame and destitute "of friends, have been tempted to destroy themselves or their infants, "unanimously resolved to admit such of them to participate of the benefits "of this Charity as are found to be objects of real distress."* Such patients were only to be admitted once, and separate wards were appropriated for their reception. Out-patients appear to have been attended at their own homes from the commencement. The Physicians, according to Highmore, were allowed to take male pupils—previously qualified by having attended two courses of midwifery lectures—who lived in the Hospital and boarded at the matron's table; female pupils were also received on like terms. The Hospital is now called the General Lying-In Hospital, having been rebuilt in York Road, Lambeth, at a short distance from its original situation, in 1830, at which time it was incorporated by Royal Charter. The average annual number of in-patients is 280 and of out-patients 710, and the expenditure is about £3,000.

The Lying-In Charity for delivering married women at their own habitations was founded in 1757, to provide for those poor women whom the existing Lying-In Hospitals did not reach, for it will be remembered that the Hospitals had no out-patient branches at this time, except in the one instance of the Bayswater Hospital, which was at the extreme Western extremity of the Metropolis, and where the Out-patient Maternity

* "Pietas Londinensis." A. Highmore, 1810.

was of very limited extent. The Prince of Wales, then only five years old, became with the gracious permission of Her Majesty Queen Charlotte, its first Patron in 1768, and in the following year presented to the Charity a munificent benefaction of £500. In the first ten years of its career, its Midwives attended 4,000 poor women at their own homes. In 1841 its name was changed to the "Royal Maternity Charity," by which title it is now known. The average annual number of patients attended is at present about 3,500, and the yearly expenditure nearly £2,000.

Having given a short outline of the history and work of each of the London Lying-In Institutions, it will probably be not uninteresting to quote here the consideration which prompted the philanthropists of the eighteenth century to found them. These considerations have as much force at the present day as they had then, though they are now seldom mentioned. This is probably because the authorities of the various Charities, knowing them to be old, have concluded them to be stale, and in the effort to publish statements, appeals for help, &c., that shall not be open to the reproach that they are hackneyed, have permitted the strongest and most forcible claims that the Lying-In Hospitals have to the sympathy and support of the benevolent to remain unmentioned. The following remarks on the necessity for Lying-In Hospitals are quoted from "Maitland's History of London," 1775.

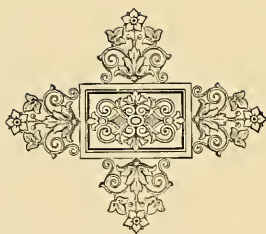
"Amidst the variety of Charities which are the distinction and glory of this age and nation perhaps not one has been proposed to the publick more truly beneficial, or more extensive in its benefits, than an Hospital for lying-in women. It is natural and just to observe that the arguments for establishing any Hospital are at least as strong when applied to this. Poverty is an object of pity. Sickness and poverty united seem to comprehend all the natural evils of life. But it is not the case of every sick person to be distressed in circumstances, and there are not many persons thus distressed whose calamity it is to be frequently or periodically afflicted with sickness; whereas most women that marry bear children, and those who work for their subsistence are for a considerable part of their lives annually

“disqualified for labour; at other times their labour is but a bare support. During the latter part of their pregnancy and the time of their lying-in, the needy family is wholly taken up in attendance upon them, and the joys natural to such a season are overshadowed by the wants which surround them; while if they be destitute of this attendance how great is the hazard that the helpless mother, or more helpless child, or perhaps both, may by their deaths become melancholy instances of the evils of real poverty.”

It will be noticed that the reasons for the existence of Lying-In Hospitals here set forth are wholly philanthropic and charitable in character, but I wish to point out that there is another very important, if not equally powerful, reason for their existence, viz., the facility they afford for the practical instruction of pupils in the art of rescuing women from the perils of childbirth, who without some *practical* training could not be entrusted, without grave risk to the patient, with the charge of a woman in her confinement. Unfortunately, all the Lying-In Hospitals do not labour in this field, except in so far as Midwives and Nurses are concerned, as the Rotunda Hospital at Dublin, and Queen Charlotte's Hospital in London, are the only Lying-In Hospitals in the United Kingdom that make any provision for the preliminary obstetric education of Students of Medicine, and until the establishment of the Midwifery School at Queen Charlotte's Hospital in 1874 the Dublin Hospital stood alone in this particular. Until that time the majority of the students of the great London Medical Colleges were forced to journey to Dublin to acquire the practical training in Midwifery necessary to satisfy the various examining bodies. As I have said, this is not now the case; last year forty-six students passed through a short course in Queen Charlotte's Hospital, and this year the number will probably be not less than 100. It is to be hoped that the other Lying-In Hospitals will soon follow the example thus set, for it must be clear to every one that the necessary practical knowledge to enable the medical man to undertake at first the conduct of a lying-in case cannot be acquired in books or by lectures, but can only be obtained under able guidance at the bedside of the patient. There are but four Institutions in London where the means for such training

exist; and when the large number of students of medicine constantly undergoing training in the London Medical Schools is borne in mind, it is obvious that if the practice of all the Lying-In Hospitals were rendered available for the purpose, it could not do more than meet the want, even if it succeeded fully in doing that. These remarks are intended to show how important it is in the interests of the public that the practice of the Lying-In Hospitals should (as is the case with other Hospitals) be utilised for the practical training of the medical profession, and that in their dual capacity of Charitable Institutions for the relief of the poor, and establishments for the practical instruction of students of medicine, the Lying-In Hospitals have claims to the sympathy and support of the public at least equal to those possessed by any other class of Medical Charity.







THE
HISTORY, OBJECTS AND PRESENT STATE
OF
QUEEN CHARLOTTE'S
LYING-IN HOSPITAL.

CHAPTER I.

THE HISTORY OF THE HOSPITAL, FROM ITS FOUNDATION IN 1752 TO ITS
REMOVAL FROM BAYSWATER IN 1813.

Early titles of Hospital—Situation 1752-1782 doubtful—Location 1782-1791—Aspect of Oxford Road at this time—Adjacent objects of interest—Tyburn Tree—Tyburn Turnpike—St. George's Burial Ground, and graves of Rev. Laurence Sterne and Sir Thomas Picton—Incidents while Hospital was situated in St. George's Row—Situation 1791-1813—Decadence of Hospital while at Bayswater—Intervention of H.R.H. the Duke of Sussex, and reconstitution of the Institution in 1809—Her Majesty Queen Charlotte becomes Patron—Active interest of several Members of the Royal Family in the Charity—Succession to the office of Patron of King George IV., King William IV., the Dowager Queen Adelaide, and Her Majesty Queen Victoria—Work of the Hospital while at Bayswater—Training of Pupils in Midwifery and Rules for the Pupils—Number of Patients—Efforts of the Clergy on behalf of the Hospital—Grand Concert for the benefit of the Hospital—Singular Resolution of the Committee of Management—Publication of a libel on the Hospital; conviction and imprisonment of the offender—Remarks upon the libel—Dilapidated condition of the Hospital building—Purchase of the Manor House of Lisson Green, Marylebone, and removal of the Hospital from Bayswater.

QUEEN CHARLOTTE'S Lying-In Hospital, formerly known as the Bayswater Lying-In Hospital, the General Lying-In Hospital at Bayswater, and the Queen's Lying-In Hospital, was founded in 1752, and was thus the third in order of date among the Lying-In Hospitals of London; the British having been established in 1749, and the City of London in 1750, while the fourth and last in point of date, the General at Lambeth, formerly called the Westminster Lying-In Hospital, was instituted in 1765.

The situation of the Hospital at the time of its establishment and for the thirty succeeding years is not known with certainty. The earliest reference to its situation that I have been able to find, is contained in one of several Licences granted to the Charity by the Justices of the Peace for the County of Middlesex, as required by the Act 13 George III. cap. 82. This Licence is dated 10th January,

1782, and the Hospital is therein described thus :—"The General Lying-In Hospital for married and unmarried women, in St. George's Row near Oxford Street Turnpike, in the Parish of St. George Hanover Square, in the County "of Middlesex." As it may not be generally known that Lying-In Hospitals are compelled to obtain a Licence before they may receive patients, a copy of the document above referred to will not, perhaps, be uninteresting.

Middlesex.—WE whose names are hereunto subscribed, being four of His Majesty's Justices of the Peace for the said County of Middlesex now assembled in the General Quarter Sessions of the Peace, holden for the said County in Hicks Hall, in St. John Street, in the said County (by adjournment), on this present Thursday, being the tenth day of January in the twenty-second year of the reign of our Sovereign Lord King George the Third, by the Grace of God of Great Britain, &c., do, in pursuance and by virtue of the power given to us by the Act of Parliament, made in the thirteenth year of His present Majesty King George the Third, intituled "An Act for the better regulation of Lying-In Hospitals and other places appointed for the Charitable reception of Pregnant Women, and also to provide for the settlement of illegitimate children born in such Hospitals and places," Grant unto the Right Honourable Ralph, Earl of Verney, President, the Vice-President, and the Governors of the General Lying-In Hospital for married and unmarried Women, in St. George's Row, near Oxford Street Turnpike, in the Parish of St. George, Hanover Square, in the County of Middlesex, Licence to keep one Hospital, House, or Place, and no more, for the Publick or Charitable reception of Pregnant Women, called the General Lying-In Hospital for married and unmarried women in St. George's Row, near Oxford Street Turnpike, in the Parish of St. George, Hanover Square, in the County of Middlesex, to be used or appropriated, or to be continued to be used or appropriated, for the Publick Reception of Pregnant Women, pursuant and according to the true intent and meaning of the said Act of Parliament; PROVIDED NEVERTHELESS, that the said Ralph, Earl of Verney, President of the General Lying-In Hospital, the Vice-Presidents, and the Governors of the same, in order that it may be more easily known that the said Hospital, House, or Place is Licensed as aforesaid, do affix and keep up over the Door or Publick Entrance of the said Hospital, House, or Place, an Inscription in large letters, in the following words :—LICENSED FOR THE PUBLICK RECEPTION OF PREGNANT WOMEN, PURSUANT TO AN ACT OF PARLIAMENT PASSED IN THE THIRTEENTH YEAR OF THE REIGN OF KING GEORGE THE THIRD; and in case such inscription shall not be fixed and kept on the Door or Publick Entrance of such Hospital, House, or Place, this Licence shall become null and void. Given under our hands at the said Session, and signed by us the said Justices in open Session, the day and year first above written.

(Signed) DAVID WALKER,
CHARLES TRIQUET,
J. GIRDLER,
W. BLACKBOROW.

There can be no doubt, then, that the Hospital was situated in St. George's Row in 1782, and there it remained till it was moved further west nine years later. Before I proceed to state what little is known of the Charity while it stood in St. George's Row, I propose to turn aside for a moment to explain the reason for stating above that its situation prior to 1782 is not known with certainty. It has been stated and accepted as true, for at least seventy years,

that the Hospital was founded in 1752, in St. George's Row, near Tyburn Turnpike, and for this reason my statement calls for explanation.

Having assumed, on the authority of numerous papers which I had seen that it was a fact that St. George's Row was the scene of the Hospital's work from the date of its foundation to 1791, I felt that it would be interesting to discover if possible the exact position it occupied in the Row, and the number of the house. With this view a visit was paid to the Vestry Hall of the Parish of St. George Hanover Square, for the purpose of searching the Rate Books for the desired information. This work was very laborious and not very fruitful of result. Commencing from 1791 and working backwards, I found that St. George's Row occupied the site of the houses now known as Nos. 20 to 33, Hyde Park Place, and that probably the second house in the Row was formerly the Bayswater Lying-In Hospital. When the year 1767 was reached, however, St. George's Row disappeared from the Rate Books altogether, and was not to be found in any of them prior to that date. This implied, if it did not absolutely prove, that St. George's Row was not built before 1768, and this opinion was somewhat strengthened by an examination of an excellent map of the parish, dated 1725, from which it appeared that at that time (twenty-seven years before the Hospital was founded) there were scarcely any houses west of Marylebone Lane on the Oxford Road, and not a vestige of a building of any kind where St. George's Row afterwards stood, nor within seven hundred yards of its site. Nothing more definite could be learnt at St. George's Vestry, so it was necessary to go further afield. The British Museum was next laid under contribution, and a reference to the map of London published in 1746 by Roque, who was then Royal Topographer, showed that up to that time the aspect of the Oxford Road for at least a mile west of Marylebone Lane, was substantially the same as in the map before referred to, and that up to that date there was not a house standing on the site where the Hospital is reputed to have stood six years later, and not only the Hospital, but a row of houses of which the Hospital was one.

In a correspondence which then took place with Mr. J. H. Smith, the Vestry Clerk of St. George's Hanover Square, who throughout the enquiry was extremely kind and to whom I am indebted for much valuable assistance and information, I learnt that a piece of ground on the north side of the Oxford Road was purchased under the power of an Act of Parliament in 1763 by the St. George's Parish, for a burial ground, and that *leases of the waste ground in front* (which was the site of the place known as St. George's Row), were granted for ninety-eight years *from 1766*, and that St. George's Row first appeared in the Rate Book in 1768, there being then only one house rated.

This was positive and authoritative evidence that St. George's Row was not in existence in 1752.

In the course of my researches at the British Museum, I found some facts stated in Malcolm's "*Londinium Redivivum*"* which threw further light upon the subject. The following is an extract :—

"The burial ground of this parish (St. George's, Hanover Square) was filled to overflowing in 1763. Sir Thomas Frederick being seised of the Manor of Paddington, and several lands, &c., in the parish, held under a lease for three lives from the Bishop of London, agreed to sell "the Rector and Churchwardens" (of the Parish of St. George, Hanover Square) "all his interest in five acres of ground in Tyburn Field, part of the above premises, for an adequate consideration, in breadth 403 feet 4 inches, and in length 540 feet, for a cemetery; the Rector, &c., to pay £15 per annum during the then lease from the Bishop, and £20 to the Bishop and his successors as long as it remained in his or their possession, and not in lease from him or them to any persons claiming or to claim under or by virtue of the will of Sir Thomas Frederick: "a neat building was erected soon after on the south side of the above ground for the reception of the priest and persons engaged at funerals, which is a considerable improvement to the appearance of the Uxbridge Road."

At a subsequent interview with Mr. J. H. Smith, the possibility of houses having previously stood abutting on the Uxbridge Road and on the south side of the ground converted into a cemetery in 1763 was discussed, and he agreed with me in thinking that to suppose houses to have been built after the date of Roque's Survey (1741-1745), and to have been removed before 1766, when leases were granted of the *waste ground* in front of the cemetery, is simply absurd. Beside, if houses *had* stood there it is hardly conceivable—unless we suppose a most extraordinary coincidence—that they should have been called St. George's Row; since it is but reasonable to conclude that St. George's Row was so called because it was built on land belonging to St. George's Parish, but situate outside the parish proper.

At this interview Mr. Smith was kind enough to lend me a copy of the Act of Parliament under which this purchase from Paddington was made. The Act is the 3 George III., cap. 50, and is intitled "An Act for vesting certain parcels of land in Paddington, in the County of Middlesex, "in the Rector and Churchwardens of the Parish of St. George, Hanover Square, in the said County, and appropriating the same for a burial ground "for the said parish." On reading it, it was found that the quotation from Malcolm, given above, was correct in every particular.

I epitomize the foregoing remarks for the sake of clearness. It has been shown that—

- (a) In 1742 there were no houses standing where St. George's Row was afterwards situated.

* "*Londinium Redivivum*." J. P. Malcolm, 1804.

- (b) The land on the north side of the site afterwards occupied by St. George's Row, was acquired by St. George's Parish in 1763, and leases of the *waste ground in front* were granted in 1766.
- (c) In the Rate Books of the Parish of St. George Hanover Square, St. George's Row appears for the first time in 1768.

It is submitted, therefore, that it is established beyond all reasonable doubt that St. George's Row was not built before 1768, and that therefore the Hospital could not have been established there in 1752. Where it was established is the next question that proposes itself, but in spite of careful enquiry and research I am unable to throw any light upon the subject.

In the Chapter on the Hospitals and Almshouses of London in Maitland's *History of London** (1756), mention is made of a "Lying-In Hospital in Duke Street, Grosvenor Square, which first began in Jermyn Street, St. James's." As the Lying-In Hospital at Bayswater is not mentioned in this work, it occurred to me that it might have been founded in Jermyn Street, removed first to Duke Street, Grosvenor Square, and afterwards to St. George's Row, and that in this way Maitland's Duke Street Hospital and ours might be identical. Another search in Rate Books failed, however, to find a reference to a Hospital of any kind in Duke Street at the time Maitland's book was written, and all attempts to establish a connection between the Charity therein referred to and the Bayswater Hospital resulted in failure.

There is a reference to the Hospital in "Gorton's Topographical Dictionary,"† which I hoped might have led to some light being thrown upon the subject, but as it only resulted in making confusion more confounded, it will be sufficient to quote it. The reference is found under the heading, "Bayswater, a Hamlet in the Parish of Paddington," and is as follows:—"The Lying-In Hospital, instituted in 1752, is also in this Hamlet, whence it was removed *from Cumberland Street, where it was first established.*"

The names Tyburn Field, Tyburn Turnpike, and Oxford Road call to mind the London of one hundred and thirty years ago, and the contrast it presents to the London of to-day. What a difference between the present Oxford Street and Uxbridge Road, and the Oxford and Worcester Road of the period of which we have been speaking! Let us suppose ourselves walking from the point where Oxford Circus now stands. At first we should find houses on both sides of the way, those on the right belonging to the new streets leading up to Cavendish Square, which was planned in 1715, and laid out

* "History of London from its foundation to the present time." W. Maitland, F.R.S., 1756.

† "A Topographical Dictionary of Great Britain and Ireland." John Gorton, 1833.

about 1717.* After passing Marylebone Lane and a few yards further on the bridge over Tyburn Brook, the houses on the right come to an abrupt termination and nothing is seen but fields stretching away to Marybone, which so late as the opening of the present century was a small village nearly a mile distant from any part of the Metropolis. This locality was at that time infested by footpads, who often robbed and stripped persons in the fields between London and Marybone.† On the left hand, however, the houses continue with a few breaks till we come to Tyburn Lane or Hyde Park Lane. A short distance further on, and at the corner of the road now called Edgware Road, we are confronted with the notorious Tyburn Tree, the public place of execution for criminals convicted in the County of Middlesex, from a date according to several authorities as far back as the middle of the fourteenth century.‡ The last execution at Tyburn was that of John Austin, in 1783.§ The Hospital was within a few yards of the gallows at this date, but it is to be hoped for the sake of their reputation, that none of the nurses or other servants were spectators at the executions, or wasted what little money they had in paying 2s. or 2s. 6d. for a seat, which Malcolm describes people as doing when Dr. Henley was to have been executed in 1758 for high treason; on which occasion he says that "in the midst of general expectation, the doctor was most provokingly reprieved;" and quite a riot ensued, owing to the disappointed sight-seers demanding the return of their money.

A few yards further on was Tyburn Turnpike, which stood in a line with the western corner of the present Edgware Road where it remained till 1825, being one of the first of the London toll-gates to be abolished, some of them remaining till 1864 when a Bill was passed by the Legislature for the abolition of all toll-bars in the neighbourhood of the Metropolis north of the Thames. From this point westward the Park ran as at present on the left—being shut out from view, however, by a wall about twenty feet high—and open fields on the right for a considerable distance till we come to Bayswatering, formerly Baynard's Watering from having supplied Baynard's Castle with water, and now Bayswater. These remarks will convey a rough idea of the aspect of this part of the high road to Oxford one hundred and

* "Timbs' Curiosities of London," p. 680. † "Timbs' Curiosities of London," p. 680.

‡ The gallows, which was triangular, was for many years a standing fixture on a small eminence at the corner of the Edgware Road, on the identical spot where a tool house has since been erected by the Uxbridge Road Trust; beneath this place lie the bones of Ireton, Bradshaw, and other regicides, which were taken from their graves after the Restoration and buried under the gallows.—"Smith's History of Marylebone, 1833."

§ "Timbs' Curiosities of London," p. 744.

thirty years ago. Things have so changed since then that where the Tyburn Brook crossed the road, and where the Tyburn Tree stood, are questions upon which there are many diverse opinions.

At the back of the Hospital, as has been before intimated, was situated the burial ground of St. George's Parish. Here in 1768 was buried all that was mortal of the Rev. Laurence Sterne, author of "Tristram Shandy" and "The Sentimental Journey," the English Rabelais, as he was called, of whom Horace Walpole sneeringly wrote:—"I know, from indubitable authority, "that his mother, who kept a school, having run in debt on account of an "extravagant daughter, would have rotted in a gaol if the parents of her "scholars had not raised a subscription for her. Her own son had too much "sentiment to have any feeling. A dead ass was more important to him "than a living mother." His grave is denoted by a headstone which was set up by two Freemasons, and restored by a shilling subscription in 1846.* The inscription is as follows:—

Alas! poor Yorick.

NEAR TO THIS PLACE

LIES THE BODY OF

THE REVEREND LAURENCE STERNE,

Dyed September 13, 1768.

AGED 53 YEARS.

Ab! Molliter, ossa quiescant.

If a sound head, warm heart, and breast humane,
Unsully'd worth, and soul without a stain,
If mental powers could ever justly claim
The well won tribute of immortal fame,
Sterne was the Man who with gigantic stride
Mow'd down luxuriant follies far and wide,
Yet what though keenest knowledge of mankind
Unseal'd to him the Springs that move the mind.
What did it boot him, Ridicul'd, abus'd,
By foes insulted and by prudes accus'd.
In his, mild reader, view thy future fate,
Like him despise what t'were a sin to hate.

This Monumental Stone was erected to the memory of the deceased by two Brother Masons, for although he did not live to be a Member of their Society, yet all his incomparable Performances evidently prove him to have acted by Rule and Square; they rejoice in this opportunity of perpetuating his high and unapproachable character to after ages.

W. & S.

Here also was buried, forty-seven years later, Sir Thomas Picton,† one of the heroes and victims of Waterloo; his body was subsequently removed to St. Paul's Cathedral, where it now rests.

* "Timbs' Curiosities of London."

† "London in 1883." Herbert Fry.

It will probably occur to the reader that with the gallows quite close and a burial ground at the back, the spot was not particularly well chosen for establishing a Lying-In Hospital, a view to which I am rather disposed to incline. Very likely this consideration prompted the Committee to change their quarters and go further west. Thither we will now follow them, as there are no Reports, Minute Books, or other papers of interest procurable relating to the Charity while it was situated in St. George's Row, and nothing deserving of mention is known of its history at that early period of its existence, except that in 1787 two eminent Frenchmen, Messrs. Tenon and Colomb, who had been appointed by the Royal Academy of Sciences of Paris to visit every Hospital in the United Kingdom, and to make a particular and minute report and description of each Institution on their return, visited the Hospital in St. George's Row. The date of the visit was the 9th June, and the visitors were attended on the occasion by Dr. Walsh.*

The Hospital was removed to Bayswater in 1791. From this date much more is known of its history and work (though for a few years there is still much obscurity) as all the histories of London from 1790 mention it, as well as many other works relating to the metropolis. For a long time, however, I was unable to discover its exact situation. The Minute Books, which were excellently kept, have been preserved from 1809, but although they are full of information the address of the Charity is not given. In fact every document I could find at the Hospital referring to this period described it merely as the Bayswater Lying-In Hospital, and this was doubtless sufficiently exact for all purposes at that time, when the houses at Bayswater were very few and far between. When looking over some old papers, which had most fortunately escaped destruction years ago, I found a single dirty page torn from a copy of the Laws of the Charity, dated 1809, on which I read as follows:—“Patients are admitted, by letters of recommendation from a subscriber, at the “General Lying-In Hospital, Bayswater Hall.” This was a start for which I was sufficiently thankful, and as the quantity of papers was large I carefully preserved them till opportunity for further search should present itself. On the next occasion I found a draft of a letter which seems to have been sent to the clergy asking them to preach sermons on behalf of the Charity, in which it is described as the “Queen's General Lying-In Hospital, Bayswater Gate.” In a tender for butchers' meat which I found the same day, it is called the Queen's General Lying-In Hospital at Bayswater Hall. It may be mentioned in passing, that the price at which this worthy butcher—one Barnard Brooke—engaged to supply prime joints, was 7d. per lb., with a deduction of 2½ per cent. if payment

* “The Gentleman's Magazine,” 1787.

was made regularly every three months. I imagine if this gentleman's descendants are still carrying on the business, they would have to think twice before agreeing to supply us on the same terms.

Further information I failed to get at the Hospital, as all other books and papers referring to this period simply describe it as the General Lying-In Hospital at Bayswater.

The books which I have referred to at the British Museum and elsewhere do not help much, but they give some interesting particulars of which the substance is somewhat as follows:—The Hospital stood at a short distance from the high road, sufficiently retired for the necessary quiet of such a purpose, and was surrounded by a garden of sufficient extent to allow of part for a pleasant avenue and an agreeable shade on the one side, and of vegetable cultivation on the other.*

It was situated near the eastern extremity of Bayswater, the building occupying a site judiciously retired and quiet, surrounded by an extensive garden.†

In an invaluable work on the condition of the poor at this time, and in the chapter dealing with national establishments for their relief, I find the Hospital mentioned. It stands there fifth in order among the Lying-In Hospitals of London, and is referred to as "The Lying-In Hospital, Bayswater Hall, Oxford Road."‡

It is certain, therefore, that the Hospital was situated at Bayswater Hall; but then one asks where was Bayswater Hall? This is exactly what I have been unable to discover. No trouble has been spared to find out; maps of London of this date have been examined, and every book that I could imagine would refer to the subject has been consulted, but in vain. A letter which I wrote to Mr. Henry Walker, F.G.S., the able author of the papers on the "History and Antiquities of Paddington," which recently appeared in the columns of the "Bayswater Chronicle," resulted in my obtaining a suggestion that the Bayswater Gate mentioned in the document before referred to, might be the Turnpike Gate which stood at the corner of Black Lion Lane (now Queen's Road), stretching across the road to the wall enclosing Kensington Gardens. For a variety of reasons, some of which will readily occur to the reader from what has preceded, and others which occur to me but which it would be wearisome to mention, I am strongly of opinion that this is the spot close to which the Hospital formerly stood.

* "Pietas Londinensis: The History, &c., of the Public Charities in and near London." A. Highmore, 1810.

† "Beauties of England and Wales." J. Norris Brewer, 1816.

‡ "The State of the Poor, &c., from the Conquest to the Present Time." Sir Frederick Morton Eden, Bart., 1797.

Having done the best I can to settle the position of the Hospital in Bayswater, I will now proceed to speak of its history and work while there.

From 1791 to 1809, or at any rate for a considerable part of the time, certainly from 1800, the Charity was extremely badly managed. Highmore, in 1810, says: "It had lately fallen almost into disuse." In the Annual Report for 1816 are found the following expressions: "It is but a few years since this Institution was so embarrassed, as not only to be deficient in the means to discharge the current expenses, but a heavy debt had also been contracted which, &c. . . . must soon have terminated in closing the doors of this excellent Institution." And again: "From the above stated time of fearful embarrassment, &c." From these statements it is evident that the Charity, at the time referred to, was nearly on its last legs. Not much is known of the cause of all this trouble, but something has come down to us.

From the Report of a Special Committee, which was appointed in July, 1809, "To make Enquiry into the nature of the establishment of the General Lying-In Hospital, the manner in which it had been conducted, and its present state," which I have now before me, it appears that for some reason the Hospital had got to be considered as the private property of the owner of the house, that hence all the money raised by subscriptions, legacies, or otherwise, for the benefit of the Charity, was considered as disposable by him; that two doctors actually purchased the goodwill of the house, with all the supposed privileges, and by a special agreement stipulated to pay to the former proprietor one-third of a legacy bequeathed to the Hospital by the late Admiral Dennis, when it should be received, and did actually so pay it afterwards; that the Hospital was purchased by one of these doctors, and directions were given in his will to sell it again by private bargain or by public auction. It also appears that the purchaser of the house assumed the power of nominating himself Physician to the Hospital, without an election, and without the consent, or even the knowledge, of the subscribers by whom the Hospital was supported; that one of the doctors laid out considerable sums of money for the purpose of keeping the house in habitable repair; that the part of the house then allotted to patients was two small rooms in the attic storey only, the matron living in the basement, and the principal floor having been reserved for the owner of the house, and in no case for the patients; that by these proceedings the pecuniary and medical management of the Hospital fell under the control of the person who owned the house, and that the subscriptions to the Hospital had for several years so much declined, that they were not adequate to the necessary expenditure of the Charity.



Augustus Frederick

HIS ROYAL HIGHNESS

THE LATE DUKE OF SUSSEX,

President of the Hospital, 1809—1843.

No wonder the subscriptions had declined, when things were in the state described in this Report. Indeed, it is evident that the affairs of the Institution had been grossly mismanaged, and that its condition had become serious.

It was at this time that His Royal Highness the Duke of Sussex became interested in the Charity, and, being satisfied of the necessity for such an Institution in this part of London, applied himself to investigating the causes of its decay, and determining the remedies to remove them with such energy and perseverance that, in the words of the Committee at that time, "the prospect of speedy relief and future prosperity did not long remain matter for speculative opinion."

To the intervention of His Royal Highness the Duke of Sussex at this time, the very existence of the Hospital is to be attributed.

The work of renovation was not a light one, even for one in the high position and possessing the commanding influence of His Royal Highness; and the Minute Books for the years 1809 to 1812 are a long unbroken record of changes, additions, and improvements, effected at his instance.

His Royal Highness became President in July, 1809, when a Committee of twelve Governors was appointed; he was also induced, as his residence at Kensington Palace was in the immediate vicinity of the Hospital, to accept the office of Chairman of the Committee. In October of the same year, a Code of Laws was drawn up for the government of the Hospital by a Special Committee, of which His Royal Highness was the head; and so carefully were these Laws prepared, that, with the additions which have been made from time to time as different conditions have arisen, they have continued in force to the present day.

Perhaps nothing can show more clearly the sincerity and depth of the Duke of Sussex's interest in the Charity, than the following letter which His Royal Highness wrote to the Committee, when sending for their consideration a sketch of the Laws which he recommended for the future government of the Charity. It is as follows:—

" CHIPPING NORTON,

" September 8th, 1809.

" Gentlemen,—On my way here, where I am detained now by indisposition, I can assure you that the interest of the Bayswater Lying-In Hospital has sincerely occupied my thoughts. With the same anxiety as I would endeavour to assist a distressed friend, I have turned in my mind various plans for extricating our new adopted child from her difficulties, and for ensuring her hereafter a probability of affluence. These I will hastily commit to paper. Should any of them meet with the ideas of my brethren of the Committee, I should feel happy in their being so far adopted as to be recommended for consideration to the Governors at our next General Meeting.

"(Signed) AUGUSTUS FREDERICK."

In November, 1809, Her Majesty Queen Charlotte, at the solicitation of

His Royal Highness, became the Patron of the Institution; and its name was changed from the General Lying-In Hospital, to the Queen's General Lying-In Hospital. This statement will correct an impression which is very general, that the Hospital is called Queen Charlotte's Hospital from its having been founded by Queen Charlotte. It may be well to remind my readers, also, that Queen Charlotte could not have founded the Hospital, inasmuch as it was founded in 1752, at which time the future Queen Charlotte was Princess of Mecklenburgh-Strelitz, her marriage with His Majesty King George III. taking place nine years later, on the 8th September, 1761. His Royal Highness the Duke of Sussex also induced his brother, the Prince of Wales, to become a Patron and subscriber to the Hospital, who continued so as Prince Regent, and afterwards as King George IV., till his death in 1830. His Royal Highness's brothers, the Dukes of York, Kent (Her Most Gracious Majesty's illustrious father), Cambridge, and Cumberland, were also Patrons at this time, and so were their Royal Highnesses the Duchesses of Kent, Cambridge, and Gloucester.

It is worthy of mention that from the date when these Royal personages were induced by the advocacy of the Duke of Sussex to become supporters of the Charity, it has always enjoyed the high honour of Royal patronage. Queen Charlotte was succeeded in the office of Patron by King George IV.; King William IV. next accepted it, and His Majesty was succeeded by the Dowager Queen Adelaide, who remained Patron till her death in 1849. In the year 1850 Her Majesty Queen Victoria was graciously pleased to become and still continues to be Patron, and in 1866 the office of Vice-Patron was accepted by Her Royal Highness the Princess of Wales. To this list of Royal Patrons of the Hospital must also be added the name of His late Majesty Leopold King of the Belgians, who was a generous contributor to its funds for upwards of thirty years.

His Royal Highness's association with the Charity resulted in numerous members of the nobility and gentry becoming subscribers to its funds; and we find among its supporters in 1816, ten Royal Princes and Princesses, and nearly one hundred ladies and gentlemen of title, including the Duke of Bedford, the Duchess of Buccleuch, the Duchess of Bristol, the Duke and Duchess of Devonshire, the Duke and Duchess of Grafton, the Duke of Hamilton, the Duke of Marlborough, and the Duchesses of Richmond, of Rutland, and of Wellington.

Under these happy auspices the Charity made rapid progress, and we find its work most favourably referred to in various books and publications of the time.

It was the first Lying-In Hospital in Great Britain which combined the advantages of affording relief both to in-patients and out-patients, and the first also to have compassion on unmarried women with their first child. The Governors, reflecting on the numerous instances where women of this description, overwhelmed with shame and destitute of friends, had been tempted to destroy themselves or their infants, resolved to admit such of them to participate in the benefits of the Charity as were found to be deserving objects. Separate wards were set apart for these unmarried women, and the Hospital was worked on similar principles to those at present in force.

With regard to the out-patients, the limits within which they were attended were Temple Bar and Holborn Bar to the east, Hammersmith to the west, Fulham to the south, and Hampstead to the north. It will at once be seen that a large number of Midwives would be necessary to provide for the needs of a district so extensive; and such was, in fact, the case, for in 1816 there were seventeen Midwives on the Hospital list.

The mention of a district of this great extent, within which there was no other Institution for the relief of necessitous women at the anxious period of childbirth, shows the need there was for such a Charity in this part of London, and what a loss it would have been to this unfortunately numerous class, if the Hospital had through mismanagement ceased to exist. They had no house of refuge nearer than Westminster Bridge to the south, or Brownlow Street to the north, and if they failed to procure the necessary letter of recommendation for either of these, they were obliged to proceed as far as the Lying-In Hospital in the City Road. Many such cases had occurred, the serious risks of which are very apparent when their pregnant condition is considered.

In addition to providing for the delivery of poor lying-in women, the Hospital, even at this early date, received resident male pupils. Women, also, who were desirous of receiving instruction in Midwifery, were admitted, provided there were then no male pupils in the house. I desire to call particular attention to the preceding, as showing that, if not from its first commencement at any rate from 1809, when the Hospital was renovated and reconstituted under the personal supervision of His Royal Highness the Duke of Sussex, a Training School for Medical Pupils as well as Midwives has been a formally constituted integral part of its purpose and aim. As this renovation in 1809 was practically the establishment of the present Institution, and is certainly the earliest date from which a continuous record of its laws and work exists, it may be said that the reception and training of Medical Pupils and Midwives was an essential feature in the design of the Charity at the beginning, especially as there is nothing to show that they were not received before 1809,

any more than there is evidence to the contrary. For the purpose of placing on record more definite evidence than mere statement of the fact that pupils were received at this time, I give an excerpt from the Laws for the Government of the Institution as amended on the 21st October, 1809, His Royal Highness the Duke of Sussex being in the chair, which Laws were then formally confirmed by His Royal Highness's signature.

“HOUSE PUPILS.”

“The Physician and Surgeon in Ordinary shall have the privilege of taking Pupils, who, before they are admitted, must be examined and approved by them.

“All such Pupils shall have attended at least two Courses of Lectures on Midwifery.

“There shall not (for the present) be more than two Pupils residing in the Hospital, who shall be engaged for not less than three months, or more than six, and may board at the Matron's table, paying to the Treasurer, three months in advance, at the rate of One Guinea per week, in which shall not be included either washing, tea, sugar, wine, or porter; and who shall not leave the Hospital at any time whilst the Matron is absent from it.

“Not more than one Pupil shall at any time be allowed to go into any of the Wards, nor shall he enter the Wards except with the Physician, Surgeon, or Matron, unless in cases of emergency, which he must report immediately in writing either to the Physician or Surgeon; and if any Pupil shall act contrary to this order, or in any manner misbehave, such Pupil shall be immediately dismissed from the Hospital, and excluded from any further privilege of attending the same.

“Women desirous of being instructed in the practice of Midwifery, may be admitted to the Hospital on the recommendation of the Physician or Surgeon in Ordinary, on the same terms as the male Pupils, provided there shall be no male Pupils then residing in the house.”

These were the fundamental objects of the Charity in 1809, and from this time it settled down to work in real earnest. For the next ten years the annual average of in-patients was one hundred and forty, and of out-patients one hundred and nineteen; and the numbers gradually but constantly increased. There is no evidence obtainable as to the results, or whether there were many deaths among the mothers or children. The Minutes show that some deaths occurred, but particulars are wanting.

In 1810 an epidemic of scarlet fever occurred in the Hospital, which was so severe that several patients died, and it was necessary to close the Hospital for three months. During this time temporary premises, consisting of the upper part of a house, were taken at 7, Junction Place, Paddington, for the sum of twenty-four pounds for the three months, where the operations of the Charity were carried on, and for which the Hospital Authorities were compelled to take out a separate licence. These three months, during which the house at Bayswater was unoccupied, afforded opportunity for thoroughly cleaning and disinfecting it, and several small repairs were made at the same time to render the place more habitable, for it was very dilapidated and by no means water-tight; and many complaints are found in the Minute Books from 1809 as to its unfitness for the purposes of a Hospital.

At this time the Clergy rendered most valuable assistance to the Charity by preaching sermons in its behalf. In several instances a sum exceeding one hundred pounds was received as the result of a sermon. One such occasion is described in the following copy of a public notice referring to it :—

TO THE INHABITANTS OF CHELSEA.

PARK CHAPEL, CHELSEA,

Having been Re-built and considerably Enlarged,

WILL BE OPENED FOR DIVINE SERVICE

On SUNDAY next, October 14th, 1810,

WHEN

A SERMON

WILL BE PREACHED, FOR THE BENEFIT OF THE

QUEEN'S LYING-IN HOSPITAL, BAY'S-WATER,

BY THE

RIGHT REV. JOHN, LORD BISHOP OF LONDON.

His Royal Highness the DUKE of SUSSEX, &c., President
of the Institution, will be present on the Occasion.

STEWARDS.

SIR HENRY WILSON
SIR HENRY GWILLIM
COLONEL SMYTH
G. BURLEY, Esq.

J. RICHARDSON, Esq.
W. BOSCAWEN, Esq.
M. YATMAN, Esq.
R. CLARKE, Esq.

Together with the Trustees and Committee of the said Hospital.

During the Service will be performed the HUNDRED AND FORTY NINTH PSALM, a CHORUS from the "CREATION," the HALLELUJAH CHORUS, and CORONATION ANTHEMS, &c., by a Select Company of Professional Singers, assisted by His ROYAL HIGHNESS the DUKE of KENT'S BAND.

THE SERVICE TO BEGIN AT HALF PAST ELEVEN.

In March, 1811, the renowned singer, Madame Catalini, and Mr. Braham the celebrated tenor, with some musical friends, offered to sing for the benefit of the Hospital. A Concert was accordingly arranged to take place early

in May. A considerable sum was received by the Hospital as the outcome of this act of kindness, and both Madame Catalini and Mr. Braham were elected Honorary Governors for their efforts on behalf of the Institution.

At the Committee Meeting in May of this year, a few days before the Anniversary Dinner, I find the following Resolution entered as carried unanimously: "Resolved, that at this and all other Anniversary Dinners, "no French Wines or Madeira shall ever be introduced." When it is remembered that the Peninsular War was at this time at its height, the battles of Fuentes d'Onore and Albuera being fought in this month, the antagonistic spirit disclosed in this Resolution will not be difficult to understand.

In September, 1812, a most extraordinary letter, signed, "An Inhabitant "of the Neighbourhood," appeared in the columns of a weekly pamphlet called "Truth," otherwise "Saturday Morning," containing most extravagant charges of misconduct against the officials of the Hospital, stating that the Nurses accepted bribes, and charging to the Management the most outrageous and noxious abuses.

A letter more grossly violent, both in the language employed and in the charges made, can scarcely be conceived. It is utterly unfit for repetition. An idea of its character may be formed by reading the opening sentence, which was as follows:—

"TO THE EDITOR OF 'SATURDAY MORNING.'

"Sir,—The principles of your useful work seem to me calculated to improve and inform the "public on every topic of notoriety. My communications on the B**sw**** Lying-In Hospital "may perhaps stagger belief at the first blush, but when properly explained they will banish doubt "and fill with indignation the breasts of those who are not totally lost to every principle, &c., &c." Here follow the details which I have already alluded to; the writer concludes: "As I am "personally known to you, Sir, you will not, I presume, impute this representation to any but the "proper motives; from

"Your friend and well-wisher,

"AN INHABITANT OF THE NEIGHBOURHOOD.

"Saturday Evening, *September 12th*, 1812."

To the letter was affixed the following editorial note:—

"We agree with our friend that a parallel case of depravity has not before come within "our knowledge, and we have already given it a place in this work, &c., &c."

As soon as His Royal Highness the Duke of Sussex and the Committee became aware of the publication of this letter, three of the Members called upon the Editor of the paper, told him it was an infamous fabrication, and demanded that he would give up the author and thereby prevent a prosecution against himself. This, however, he peremptorily refused to do, and insisted that the statement was correct in all respects. No satisfaction being obtained

from the Editor, it was decided to prosecute him for libel, and steps were immediately taken.

It soon transpired that the letter was the production of the Editor himself, the form it was thrown into, with the editorial note at the end, being a subterfuge to lend to the complaint the appearance of being that of a private individual associated with the work of the Charity, and thus to add to its weight and importance.

The case was tried at the Westminster Sessions, in January, 1813. The following is an extract from the brief for the prosecution, which was conducted in the name of John Badger, the Secretary of the Hospital :—

“The defendant, named William Horncastle, is a stationer and pamphlet seller of No. 9, Titchborne Street, Haymarket, and this prosecution is for publishing on the 19th day of September last a gross, false, and scandalous libel on the said Institution; in a low scurrilous “weekly publication called ‘Saturday Morning’ or ‘Truth,’ of which the defendant is the publisher.”

In the result the defendant, William Horncastle, was convicted of libel and sentenced to twelve months' imprisonment, and at the expiration of which he was to enter into recognizances for his good behaviour for two years, himself in five hundred pounds, and two sureties in two hundred pounds each; and to be kept in custody until such sureties should be given.

A better illustration of the phrase “the biter bit,” would be hard to find. The libel was far more malicious than at first appears. As we have stated, there had been bad management in the administration of the Charity, and knowing this, and acting on the principle that a lie which is half the truth is always the most difficult to disprove, this man took advantage of the difficulties from which the Charity had not yet quite emerged, to level charges against it which, if not refuted, would probably have resulted in its doors being closed. Out of evil, however, often comes good. The speed with which such things always travel must have brought the matter to the notice of everyone who knew of the Hospital, and of many who were previously unaware of its existence. The papers which I have seen relating to the prosecution, state that considerable public interest was excited in the matter. This trial, therefore, proving as it did that such charges as these were not founded on fact, and could not be substantiated, furnished at once a decisive and authoritative contradiction of the reports which had been rife, as well as an audience, so to speak, immeasurably larger and more general than could ever have been reached by any method, however able and however actively and diligently applied, which it would have been possible for the Committee to devise for the purpose of bringing to the notice of the public an accurate statement of the condition of the Charity.

In the early part of 1813, William Horncastle, then undergoing his sentence, appealed to the Committee, through his friends, to support a petition to the Crown for the remission of a part of his sentence; but although at first His Royal Highness the Duke of Sussex hoped the application would be leniently considered by the Committee, it was subsequently felt that, as the libel was of so damaging a nature, and as the application was unaccompanied by any apology, it would be wrong in the interests of the Charity to entertain it for one moment, and it was accordingly dismissed.

This incident may be considered as the closing scene in the dark chapter of the history of the Hospital, for although the Charity has experienced many ups and downs in the seventy-three years that have since elapsed, its very existence has not been threatened as it undoubtedly was at that time.

I have already had occasion to mention, in connection with the closing of the Institution in 1810, on the occasion of an outbreak of scarlet fever, the fact that complaints of the bad state of the Hospital building had often been made.

In the Minutes of the Committee Meetings in 1811 and 1812, frequent references are found to the dilapidated condition of the house, its unfitness for occupation as a Hospital, and its out of the way situation. At a General Meeting in February, 1813, the subject came on for special discussion. At the same Meeting a letter was received from the Solicitors to the Hospital Estate, stating that a fresh lease of the premises could not be obtained; and, further, that a convenient, well situated freehold property, including a good house in a desirable situation, was then on sale, and not unlikely to be had on reasonable terms. The Governors present thereupon gave instructions for steps to be taken to ascertain on what terms the property referred to could be acquired.

The premises in question were the Old Manor House of Lisson Green, and grounds, in Marylebone.

Enquiries were duly made, and negotiations entered into, which resulted in the property being purchased by R. Kilby Cox, Esq., a Member of the Committee of Management, on behalf of the Governors of the Hospital, from Benjamin Tucker, Esq., the owner.

CHAPTER II.

THE HISTORY OF THE HOSPITAL FROM ITS REMOVAL TO MARYLEBONE
TO THE PRESENT TIME.

Sketch of the History of the Manor of Lisson Green—Description of the Manor, from Domesday Book—Purchase of the Manor House by the Hospital authorities—Description of interior of the house—Sale of property in Slingo Lane belonging to the Manor House Estate—Finance of Hospital subsequent to removal—Continued support by the Clergy—Revision of the Laws—Construction of two new Wards—Failure of Charity's Bankers—Increase in the number of patients—Unsatisfactory condition of Hospital building—Failing health of H.R.H. the Duke of Sussex—Second failure of Charity's Bankers—Death of H.R.H. the Duke of Sussex—Progress of the Institution during the Presidentship of His Royal Highness—His Royal Highness the Duke of Cambridge becomes President—Rebuilding of Hospital decided upon—Old Manor House of Lisson Green demolished—Completion and opening of the new Hospital—Description and principal characteristics of the new building—Cost of the new Hospital—Subsequent structural additions and alterations—Great increase in the number of patients—Inadequacy of the accommodation—Decision to enlarge the Hospital—Details of the proposed enlargement—Results following rebuilding in 1856—Unsuccessful attempt to obtain an Act of Incorporation—Establishment of Samaritan Fund—The Metropolitan Railway and the Hospital—Viscount Portman elected President—Hospitals and the payment of Poor Rates—Training of Midwives for the Army—Special provision for Wives of Soldiers and Sailors on active service—The Administration reorganized—Establishment of Metropolitan Hospital Sunday and Hospital Saturday Funds—Progress of Hospital and Training School—Wood pavement—Incorporation of the Institution by Royal Charter.

BEFORE proceeding to refer to the points of interest in connection with the Hospital since its removal from Bayswater, it may be worth while to allude briefly to the history of the Manor and Manor House of Lisson Green, Marylebone, which was for the future to be the scene of the work of the Charity.

Occasion may here be taken to refer to the origin of the name Marylebone, a point upon which an erroneous impression exists in the minds of many. It was anciently called Tiburn,* from its situation near a small bourne or rivulet formerly called Aye-brook or Eye-brook, and later, Tiburn Brook.†

When the site of the Church at Tiburn was altered to a spot nearer the brook, it was probably called Mary-at-the-Bourne. The word Bourne, by the omission of the letters *ur*, became bone, hence Marrowbone, with the lower

* Lysons' "Environs of London," 1795.

† This brook or bourne ran on the south side of Hampstead, passing near Bellsite to Barrow Hill Farm, thence through Marylebone Park (now Regent's Park) to Marylebone Lane, across the Oxford Road (now Oxford Street), near Stratford Place, and Piccadilly under a bridge near Hay Hill (which is supposed by some to take its name from this Aye-brook), through the Green Park, near Buckingham House, thence through Tophill Fields (on part of the site of which now stands Vincent Square, Westminster), finally falling into the Thames at a place called King's Scholars' Pond, a little below Chelsea.

classes;* and Marylebone, or Mary the good, with others who have not examined into the derivation.†

After this little digression, I will proceed to deal with the early history of the Manor of Lisson Green:—

The Manor of Lilestone (Lisson Green) is mentioned in Domesday Book, among the lands in Osylvestane (Ossulstone) Hundred given in alms. It is stated to have contained five hides (about 600 acres). In King Edward the Confessor's time, Edward, the son of Suain, a vassal of the King, held the Manor, and might alien it at pleasure. When the survey was taken, Eideva held it of the King. The land, says the record, is three carucates (plough-lands). In demesne are four hides and a half, on which are two ploughs. The villanes have one plough. There are four villanes, each holding half a virgate (a virgate equalled one-fourth of a hide of about 120 acres), three cottagers with two acres, and one serf; meadow for (the team of) one plough; pasture for the cattle of the village; wood for 100 pigs; and threepence arising from the herbage. With all its profits it was worth sixty shillings; in King Edward's time, forty shillings.‡

The Manor afterwards became the property of the Priory of St. John of Jerusalem,§ on the suppression of which it was granted in 1548 to Thomas Heneage, Esq., and Lord Willoughby, who conveyed it the same year to Edward, Duke of Somerset. On his attainder it reverted to the Crown, and was granted in 1564 to Edward Downing, Esq., who conveyed it the same year to John Milner, Esq., then lessee under the Crown, in the possession of whose family it remained nearly two hundred years. On the death of his descendant, John Milner, Esq., in 1753, it passed under his will to Edward Lloyd, Esq., of Gregories, in the County of Bucks. The Manor (being then the property of Captain Lloyd of the Guards) was sold in lots in 1791. The largest lot, including the Manor House and the Yorkshire Stingo Bowling Green House and Gardens, was purchased by John Harcourt, Esq., M.P., who built a mansion for his own residence ¶ at the corner of Harcourt Street and New Road ¶ (now Marylebone Road). Part of the Harcourt Estate was subsequently—in 1803—

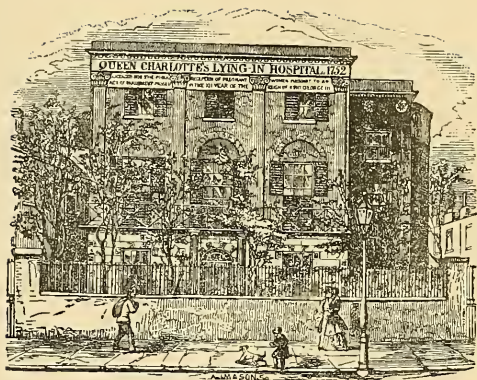
* This statement about the lower classes is open to adverse criticism, inasmuch as Pepys in his "Diary," vol. ii., page 226, has the following:—"Then we went abroad to Marrowbone, and there "walked in the garden, the first time I ever was there, and a pretty place it is."

† Malcolm's "Londinium Redivivum," 1807.

‡ Domesday Book. § Lysons' "Environs of London," 1795.

¶ Smith's "History of Marylebone," 1833.

¶ This New Road (of which part is now called the Marylebone Road, part the Euston Road, and a third part the Pentonville Road) was cut through Marylebone Parish from Paddington to Islington, in 1757.



THE HOSPITAL from 1813 to 1856.

(The Manor House of Lisson Green.)

sold by auction in separate lots, and the Manor House with its adjoining grounds was purchased by Benjamin Tucker, Esq., Secretary to the Admiralty,* and from him, ten years later, by R. Kilby Cox, Esq., and Charles Shadwell, Esq., on behalf of the Governors of the Queen's Lying-In Hospital, for a sum of £2,120, including a sum of £125 for fixtures.

The contract for the sale, duly signed by the contracting parties, is dated 16th March, 1813, and specifies that possession is to be given up on the 10th of May following.

The funds for the purchase of the Manor House were raised partly by subscription and partly by the sale of £1,200 three per cent. consols, which it is interesting to notice were sold at 57 $\frac{3}{8}$, and only produced £687.

The House consisted of a basement, ground floor, and first and second floors, and the following is a copy of the auctioneer's notice of the sale.

CAPITAL FREEHOLD MANSION,
Lisson Green, St. Mary-le-bone.
WITH EARLY POSSESSION.

PARTICULARS
OF
A valuable Freehold Estate,
CONSISTING OF A
SPACIOUS SUBSTANTIAL MANSION,
CALLED
LISSON GREEN MANOR HOUSE,
SITUATE
ON THE SOUTH SIDE OF THE NEW ROAD,
ST. MARY-LE-BONE,
WITH
ATTACHED AND DETACHED OFFICES,
AND
A Coach House and Stable in Bowling Green Buildings,
CONTIGUOUS,
WHICH WILL BE SOLD BY AUCTION
By MESSRS.
HOGGART & PHILLIPS,
AT THE AUCTION MART,
Opposite the Bank of England,
On FRIDAY, the 11th of September,
AT TWELVE O'CLOCK.

To be viewed, and Particulars had on the Premises; of Mr. C. SHADWELL, Solicitor,
No. 1. Holborn Court, Gray's Inn; at the Auction Mart; and of Messrs. HOGGART and
PHILLIPS, No. 62, Broad Street, Royal Exchange.

* Title deeds of the Hospital.

The Committee lost no time in taking possession of their newly acquired house, and patients were very soon admitted. The coachhouse and stable in Bowling Green Buildings were let for a term of twenty-one years at a rental of £26 per annum, and after the expiration of that period they continued to be let until they were sold to the Metropolitan Board of Works in 1869. This sale to the Board of Works was compulsory, and was required to be made under the provisions of the Marylebone (Stingo Lane) Improvement Act, 1868. Considerable difficulties arose owing to the fact that the Governors, not being a corporate body, were not empowered to dispose of the property of the Hospital. The enrolment of the conveyance of the Hospital to the Trustees, in pursuance of the Act of 1861 for the Regulation of Charitable Funds, had perfected the title of the Trustees; but it did not give them, nor did they possess, any power to sell land belonging to the Hospital, without the sanction of the Charity Commissioners. There was one course open to the Governors, however, which was that the Metropolitan Board of Works should under the provisions of the Land Clauses Act pay the purchase-money into the Court of Chancery. It would then be invested in the name of the Accountant-General and the dividends be paid from time to time to the Treasurer of the Hospital. This course was adopted; the sum paid (£550) is still standing there and the dividends are paid from time to time.

As this disposal of a part of the Hospital property is a matter of considerable importance, I append a copy of the contract for its sale:—

“Terms of sale and purchase agreed on this day, between Benjamin Bond Cabbell, of the Middle Temple, Esq.; William Colburne Towers, of Haggon House, Maidenhead, Esq.; John Propert, of New Cavendish Street, London, surgeon; and Michael Bidduiph, of Charing Cross, banker, such being the Trustees of Queen Charlotte’s Hospital (hereinafter called the Vendor), by Philip Flood Page, of 1, Catherine Grove, Blackheath Road, London, S.E., surveyor, their agent of the one part, and the Metropolitan Board of Works, by George Vulliamy, their superintending architect and agent of the other part.

“The Property so purchased is freehold of inheritance, and consists of a piece of ground with a message or tenement and workshops thereon, situate in, and having a frontage on Stingo Lane, Marylebone, in the County of Middlesex, numbered 43^a and 43^b on the deposited plan referred to in the said Act, and upon which notice the Vendor sent in a claim to the Board, dated 20th day of October, 1868. The Property is subject to the tenancies mentioned in the schedule herein written; the Vendor to deliver an abstract of his title to the solicitor of the Board at the office in Spring Gardens, if required, and to deduce a good title to the property so sold, and to convey the same to the Board according to the said Act. The purchase money agreed on is £550 (five hundred and fifty pounds). The Board are to pay the Vendors’ surveyor’s costs, amounting to £14, also the Vendors’ costs of title and conveyance as allowed by the Lands Clauses Consolidation Act, 1845.

“The purchase is to be completed at the office of the Board of Works on or before 25th day of March, 1869, but if not then completed the Vendors will from that date receive five per cent. interest, and the Board will be entitled to receive and collect the rent. The Board may enter into possession after the 25th day of March next, on giving the Vendor three days’ notice and depositing

"the purchase-money at a bank in the names of the Chairman of the Board and the Vendor, the deposit being at the Board's risk, and the Board being entitled to any interest allowed.

"As witness the hands of the said parties this 12th day of February, 1869,

(Signed) "PHILIP FLOOD PAGE."

The Schedule above referred to

Tenant named.	Commencement of Tenancy.	Term when determinable. Yearly Tenancy.	Description of Property. Nos. on Plan.
WILLIAM SMITHERS.	Lady Day, 1861.	Lady Day, 1870.	43a and 43b.

Resolution adopting this contract and directing solicitors to give effect to same, dated 12th February, 1869.

The large expenditure entailed in the purchase of the new Hospital, and the falling off in the income resulting from the sale of stock, left the finances in a very weak condition. By the end of the year, 1815, however, owing in a great measure to the exertions of His Royal Highness the Duke of Sussex, all debts were paid, and the Charity was described in the Annual Report as being free from embarrassment.

There is no doubt that the situation of the new Hospital was much better than that of the old. Even now, after a lapse of over seventy years, during which new streets have been springing up all around, the Hospital occupies a prominent position; and in those days, when no houses were near, it must have been much more conspicuous. As will be seen from the engraving facing page 21 the house stood in a large garden and was surrounded by a wall and railings. The principal entrance was on the north or Marylebone Road side, and not as at present from Harcourt Street. Among the Hospital papers I found a rough sketch of the ground plan of the Manor House, a copy of which, in the absence of anything better, I have inserted, thinking it may show more definitely than verbal description the position occupied by the house. As to the actual building, although better than the house at Bayswater, it was nevertheless suffering somewhat from age and wear and tear, as the amounts spent from time to time in renovating it show.

The number of patients relieved remained for many years pretty much the same as before the removal; and the income, except the sums contributed for the special purpose of acquiring the new Hospital, was very little larger.

A licence was duly obtained for the New Hospital, though not till attention was called to the omission by the parochial authorities. It is dated 11th July, 1816.

For the next eight years the Institution seems to have gone on very quietly, as I have found nothing in the Minute Books or elsewhere to call for special notice.

The efforts of the Clergy still continued to be actively exerted on its behalf. In June, 1820, a sermon was preached at Quebec Chapel, Quebec Street, for the benefit of the Hospital, by the Bishop of Chester, in respect of which the Treasurer received a sum of £67; and in June, 1823, at the same Chapel, the Hon. and Rev. Edward John Turnour, Chaplain to the Dowager Countess of Winterton, preached a sermon from which the Charity benefited to the extent of £101 17s. Indeed, too much cannot be said of the kindness of the Clergy at this period, resulting as it did in very considerable pecuniary benefit to the Charity at a time when such help was especially needed.

In October of this year the Laws for the Government of the Hospital were revised and improved under the immediate supervision of His Royal Highness the Duke of Sussex.

In 1824 we find the Committee announcing that "in consequence of the dilapidated state of the present building and its inadequacy to accommodate "the numerous applicants for admission," it had become necessary to make certain repairs and to construct two additional wards, and that during the time this work was in progress no patients were to be admitted to the Hospital, special arrangements being made for their treatment as out-patients. The work was commenced at the end of March, and the Hospital was re-opened on the 29th September, having been closed six months. The cost of the alterations and repairs was about £1,000, and a Public Dinner was given at the City of London Tavern, on the 13th May, His Royal Highness the Duke of Sussex presiding, for the purpose of assisting to meet this expenditure. Subscriptions and donations of an adequate amount were received at the Dinner, and the sum thus raised was lodged in the hands of the then Treasurer, who was a Member of the firm of Marsh, Stacey and Co., the Charity's Bankers. The failure of this house shortly after resulted in the loss of the whole amount raised on the above occasion, in addition to a small balance in hand on the General Fund Account. This most untoward occurrence rendered it necessary to hold another Public Dinner, with the view of improving the shattered condition of the Charity's finances. His Royal Highness the Duke of Sussex therefore appointed 17th February as the date for it to take place. His Royal Highness presided on the occasion, and presented a munificent donation of £200; and the total amount subscribed at the Dinner was nearly £1,300.

By this time the number of patients relieved had become much larger than formerly, the average annual number being about 500. The Hospital had

evidently become much better known, and this fact, coupled with its improved reputation, accounts for the increase in the numbers soliciting assistance at its hands.

In 1831 the unsatisfactory state of the Hospital building again forced the Governors to consider what had better be done. It seems that it was considered useless to attempt to restore the existing building, and I find the construction of a new Hospital was talked of, and that a fund for the purpose was opened. The project was shortlived, however, and all that was collected was £125, which was invested and remained untouched till the rebuilding of the Hospital was actually effected twenty-five years later.

During the years 1835 and 1836 the name of His Royal Highness the Duke of Sussex is found less frequently among the list of those present at the meetings of Governors. This is explained by the fact that at this time His Royal Highness's sight became seriously impaired if it was not entirely lost. It appears from the minutes of the Quarterly Meeting of Governors held on 18th July, 1836, that His Royal Highness had just undergone a surgical operation, which resulted in his sight being restored. The letter written by the Governors at this Meeting congratulating His Royal Highness on the successful result of the operation, and His Royal Highness's acknowledgments, are so interesting that I am induced to insert copies.

"To His Royal Highness The Duke of Sussex, K.G., etc., etc.,
"President of the 'Queen Charlotte's Lying-In Hospital.'

"The Governors of the Queen Charlotte's Lying-In Hospital assembled at their General Quarterly Court, beg permission to approach Your Royal Highness with this expression of their warmest congratulation upon the restoration of Your Royal Highness to the blessing of sight. To that merciful God who first said 'let there be light, and there was light,' our gratitude is justly and chiefly due; but we should be as wanting in justice as in thanks to that science of the triumph of which Your Royal Highness is so remarkable an illustration did we omit to advert to it; and we hope to stand excused in adding that the Public, and Your Royal Highness's friends and admirers more especially, have not failed to express their high gratification that he who has been for so many years the Patron and Protector of Science and its professors, should have been marked out as so signal an example of its success.
"To the blessing of sight may that of health be added, and may a long and happy life be the consequence.

"Given at the Quarterly Court this 18th day of July, 1836.

(Signed) "S. W. WATSON, *Chairman*."

His Royal Highness's reply was as follows :—

"To the Governors of the Queen Charlotte's Lying-In Hospital.

"Mr. Chairman and Gentlemen,—I thank you for your congratulation upon my restoration to the blessing of sight as well as for your kind expressions of esteem and regard.

"The interest which I for so many years have taken in the welfare of the Queen's Lying-In Hospital has made me acquainted with many valuable men, supporters of that and other

"Charitable Institutions. Their good will and good opinion must be to myself a source of gratification, and when spontaneously offered, as in this instance, must serve as an additional stimulus to my exertions in the promotion of all objects calculated to forward the benevolent dispositions of a generous Public.

(Signed) "AUGUSTUS FREDERICK, *President*."

"Kensington Palace,
"9th September, 1836."

In November, 1840, for the second time in its history, the Charity's Bankers failed. Fortunately the balance in their hands at the time was not large (£85 14s. 7d.), and therefore the loss to the Hospital was not so serious as on the previous occasion. In this as in the former instance, however, the Treasurer was a member of the firm, and the bankruptcy therefore resulted in the offices of Bankers and Treasurer both becoming vacant at one and the same time. The present law, that "The Treasurer shall not be a partner in any private bank in which the account of the Hospital is kept" no doubt originated from the fact that on the two occasions when the Charity's Bankers became bankrupt the Treasurer was a member of the firm. Messrs. Cocks, Biddulph and Co., were appointed Bankers to the Hospital in the place of the house that had failed, and they have continued to act in this capacity to the present time. Mr. Benjamin Bond Cabbell, who took a deep interest in the progress of the Institution, became the new Treasurer.

In 1843 His Royal Highness the Duke of Sussex died. In him many of the Charities of London lost their greatest benefactor and most powerful advocate. Of no one of the Charities, probably, could this be so truly said as of Queen Charlotte's Hospital. He found it on the brink of extinction, and after raising it, as it were, from the grave, and instilling new life and vigour into it, he left it at his death, after thirty-four years of unceasing personal attention not only to the leading principles of its administration but even to the minutæ of its operations, one of the most valued and thriving Hospitals in the metropolis. His Royal Highness's munificent benefactions to its funds were not less conspicuous than his devotion of time and thought to the direction of its affairs. I have already had occasion to refer to a generous gift of £200 at a time when the Charity was in great difficulties, and many other instances of His Royal Highness's liberality might be quoted.

It will not be without interest to dwell for a moment on the progress made in these thirty-four years. At their commencement the number of patients received annually in the Hospital was about 30, and of out-patients attended at home about 120; at their close the number of in- and out-patients respectively was about 200 and 330. The total number of poor women relieved during the period was no less than 12,500. The income at the commencement



HIS ROYAL HIGHNESS
THE LATE DUKE OF CAMBRIDGE,
President of the Hospital, 1843—1850.

was about £410 per annum, while in 1843 it amounted on the average to upwards of £800. During the thirty-four years nearly £32,000 was raised, and £28,000 expended, the balance having been invested in Government securities, which produced dividends averaging for the ten years ending 1843, £140 per annum, while there was no invested property whatever in 1808, and consequently no dividends were received. The Charity in 1843 had a reliable income in dividends and annual subscription of upwards of £550, whereas the amount for the years immediately preceding its renovation could not at the highest estimate have exceeded £200.

These few facts are quite sufficient to show that it would be impossible to over-estimate His Royal Highness's services to this Charity, and through it to those thousands of poor women whom it has been the happy means of relieving at a time of special need.

His Royal Highness was succeeded in the office of President by his brother, His Royal Highness the Duke of Cambridge, who had contributed scarcely less than the Duke of Sussex to the progress and prosperity of the Charity. His Royal Highness continued President till his death, on 8th July, 1850, and was succeeded in the office by the Right Honourable Lord Londesborough.

In May, 1852, Messrs. Wertheim and Macintosh, of Paternoster Row, published a little book called "Money and its Influence," which had been translated from the German by a lady, whose name is not mentioned, but whom I believe to have been Miss E. Plumtre, for the benefit of this Hospital. The particular purpose of the translator will best be explained by quoting a few words from the preface of her book, a copy of which I have before me:—
 "The funds which the translator was requested to assist in raising are for the re-building of one of the oldest Hospitals of its kind in the metropolis—and being a Hospital, consequently one of the *most* praiseworthy of Charities; as in regard to these Institutions, all may feel certain that whatever amount of money they may place at the disposal of the Managers, they are contributing to the relief of a class of applicants in whom there can be no deception, and at the time of all others when Charity is most gratefully acknowledged. The Hospital in question (*the Queen Charlotte's*) being for the reception of women alone, the translator felt of course more anxious to render any small assistance that lay in her power."

This reference to the raising of funds for the re-building of the Hospital is the first intimation of the definite intention of the Governors to erect a more suitable house. The subject had been mooted twenty-one years before, and an attempt was made to collect funds, but as we have seen the effort was not persisted in and nothing important resulted. Complaints of its dilapidated

condition had been for years very frequent, coupled with the recognition of the fact that it would be useless to expend any considerable sum in repairs, but no decision had hitherto been come to on the subject.

A Building Fund was now opened, and active efforts were made to acquire the sum needed for the work (about £4,000). Progress was for a time very slow, for in the Report for 1854 I find that the balance on the Building Fund account was less than £100. In the next two years, however, a great improvement took place, owing in a great measure to the increasing exertions of Mr. Charles Hawkins, F.R.C.S., Consulting Surgeon to the Hospital; and the Committee in the autumn of 1855 considered the amount then in their hands sufficient to justify them in commencing operations, although there was great objection on the part of some Members of the Governing body to commence building until the whole amount required by the contracts had been subscribed.

The Old Manor House of Lisson Green, which had been the scene of the Charity's operations for forty-two years, was accordingly vacated on Michaelmas Day, 1855, and the first stone of the new building was laid on the 15th November following. During the twelve months occupied in re-building the Hospital temporary premises were taken at Middlesex Place, at a rental of £50 per annum, where 88 in-patients were delivered, and whence 225 out-patients were attended at their own homes.

The new building, which was constructed from designs by Mr. Charles Hawkins, a gentleman of whom the Governors in their Report for 1856 say, "to his zealous exertions and untiring energy the building of the new Hospital is mainly attributable," was finished early in September 1856, was taken possession of by the Matron and servants on Michaelmas Day, and declared open for the reception of patients at the commencement of 1857. The Governors in their Report speak of the new building as follows:—

"It is well proportioned, admirably ventilated, and warmed by hot water apparatus, and is capable of receiving 50 patients; but the Committee propose in consequence of the smallness of the funds to restrict it to 30 patients at present. Each ward will contain three beds, and there is a convalescent ward; by the arrangements proposed to be adopted every ward will be vacated at regular intervals, so that the best sanitary plans will be carried out, and the danger arising from the spread of puerperal fever, should such cases unfortunately occur, be avoided. While your Committee have endeavoured to render the internal arrangements of the Hospital as complete as possible, they have thought it their duty to exercise the most rigid economy in not permitting any money to be spent in ornament whatever. Even the Royal Arms over the porch was presented to them by Mr. Charles Hawkins and on the opening of the New Hospital he also presented, for the Board Room, a valuable portrait, painted by Zoffani, of Her late Majesty Queen Charlotte, first Patron of the Hospital."

The above extract gives a general idea of the internal arrangements. The building consisted of a basement, ground floor, and first and second floors. In

the basement were the kitchen and other domestic offices, the servants' dining hall, and four rooms unappropriated ; on the ground floor were the Board room, Secretary's office, waiting room, sitting room and bed room for the Resident Pupil, and sitting room and bed room for the Matron. On the first and second floors were the wards. There were six lying-in wards, a large convalescent ward, w.c. and lavatory on each of these two floors. Where the domestic servants were accommodated is doubtful. It would seem that in preparing the plans servants' rooms were forgotten, but it is probable that the four rooms in the basement, described as unappropriated in the plan, were utilised for their use.

The distinguishing feature of the new building was small wards containing three beds, a feature of very great importance in any lying-in hospital. The convalescent ward, where patients were generally removed, if well enough, about the tenth day, contained six beds. The principal faults seem to have been, that the deliveries took place in the lying-in wards, that the main drain ran right under the basement from back to front of the building, and that the water-closets had a ventilation common to that of the wards.

The total expenditure in connection with the re-building, including repairs to garden walls, gate railings, &c., was £4,454. The amount raised to provide for this expenditure,—including a sum of £125 (and accumulations which brought it to £293), collected in 1831 in the attempt to form a Building Fund, as before explained, with a further sum of £203 10s. 10d., the proceeds of a concert at Exeter Hall, and £35 profit of the sale of "Money and its Influence,"—was £2,547 ; and the balance was made up by the transfer of £2,000 from the General Fund of the Hospital. The List of Subscribers to the Building Fund was headed by Her Majesty the Queen, His Royal Highness the Duke of Cambridge, and Her Royal Highness the Duchess of Gloucester.

Mr. Charles Hawkins was Chairman of the Building Committee, and Dr. Metcalfe Babington, Honorary Secretary. They divided the duties and responsibilities of Treasurer between them. Mr. Philip Flood Page was architect, and Mr. Bird, builder.

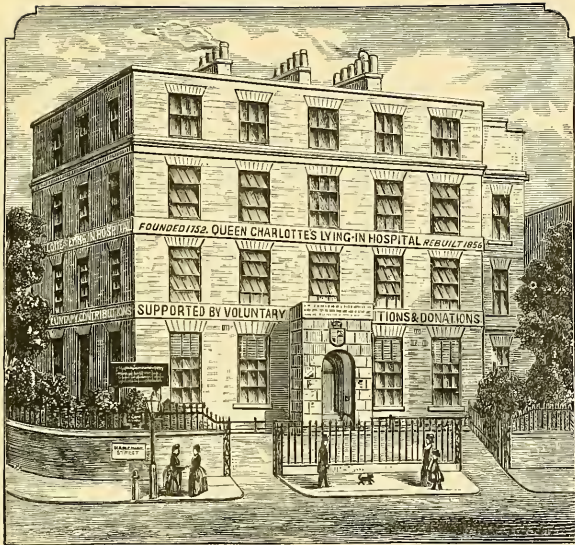
Now that I am upon the subject of the building of the New Hospital, it will promote clearness and intelligibility if I proceed to mention the various additions and alterations which the need of greater accommodation and advance in the knowledge of the laws of sanitary science have since occasioned, and I will therefore with this view depart from the strictly chronological plan hitherto followed.

In 1865 the need of greater accommodation for patients was much felt, and in addition to this it was considered injurious to the health of the servants to

sleep in the basement as they were then doing. These considerations led to the decision to add an additional storey (which is spoken of in the Report for 1865, as having been included in the original plans in 1856). This enabled the Committee to provide ample sleeping accommodation for the servants and nurses at the top of the house, and set free very considerable space in the basement. The Hospital was closed from August, 1865, till the end of the year, and opportunity was taken, while this extensive work was being performed, to effect several small but important changes, principal among which was the improvement of the ventilation of the Hospital. The cost of the additions and improvements was £1,000.

In 1872, improvements of the very greatest importance were effected in the system of drainage; they consisted of the removal of the drain, which, as already stated, ran under the basement from the back to the front of the Hospital, and the introduction of a system of drain ventilation, by means of pipes carried from the drains to a point above the roof. These improvements, the value of which it is impossible to over-estimate, were effected at a cost of £104 11s. 6d. The Governors, speaking of the work in the Report, describe it as one materially affecting the health of the patients, and so indeed it proved to be. It may be only a coincidence that the rate of mortality among the patients after the completion of this work was less than half what it had hitherto been, but it has a significant appearance. There still remained one grave and fundamental fault in the sanitary arrangements, however, which was that the water-closets were within the body of the building and had a ventilation common to that of the wards. I have no doubt it was the knowledge that the remedying of this defect would entail very considerable structural alterations and a consequent large expenditure, that deterred the Committee from undertaking the work at the same time as the above, rather than that the evil was unperceived.

No steps were taken to remedy the defect till 1877, when the Physicians, in a Report on the sanitary condition of the Hospital, which was written at the request of the Committee, called special attention to it, and strongly advised that immediate action should be taken to remove it. It was accordingly decided by the Committee to build a wing at the south end of the Hospital, which would provide considerable space on each floor for the required purpose. This wing, which was built in 1878, enabled the Committee to make the following additions:—in the basement, water tanks for the purification of ward linen before sending it to the laundry; on the ground floor, a dispensary and officers' lavatory; on the first and second floors, a ward lavatory and w.c.; and on the top floor, a lavatory, bath room, and w.c. for nurses and servants. A lift was



THE HOSPITAL IN 1884.

also added, connecting the kitchen and basement stores with each floor, thus much facilitating the conveyance of food and other necessaries from the basement to the wards. In addition to the above, some other important improvements were made. The patients had hitherto been delivered in the lying-in wards, a practice to which there were very many serious objections, but in 1878 a separate ward, called the Labour Ward, was set apart for the purpose on each floor. In the same year the basement was rendered more accessible by the construction of a larger and more convenient staircase connecting it with the ground floor; the ventilation of the rooms at the northern end of the basement was improved, and these rooms, which had previously been nearly useless, were thus rendered suitable for isolation wards. By this opening up of the basement, the admission of fresh air into the Hospital was greatly promoted, and the whole building became much fresher and more healthy in consequence. This improvement was the last alteration in the Hospital structure. At various times certain buildings, as follows, have been erected on the ground at the back of the Hospital, and have each in their degree been of great service:—a room for the porter; a chamber for the disinfecting apparatus, wherein the patients' linen is on its return from the laundry exposed to a temperature of 250° Fahrenheit before it may be supplied to the wards, in 1875; a lavatory and w.c. for the quarantine or isolation wards in the basement in 1878; and a large and commodious linen room in 1883.

The above are the principal structural additions and improvements which have been made from time to time to the new Hospital erected in 1856. Rapid as the increase of accommodation has been since that time, however, the number of poor women applying for admission has increased even more rapidly, so much so, that in 1882, 1883, and 1884, and also this year, the Committee have been compelled at times to take apartments in neighbouring houses for the reception of patients, as there has not been sufficient room in the Hospital. This difficulty was so great in 1883, that a special Committee was appointed to consider the subject. The result was that on the presentation of their Report to the Committee, it was unanimously resolved: "That it is the recommendation of this Committee to the Annual Meeting of Governors and Subscribers "that plans shall be completed and estimates obtained for the extension of the "Hospital building." This recommendation was approved by the Annual Meeting, and the plans were accordingly completed, and duly submitted to the Metropolitan Board of Works, whose consent to the addition was conveyed in a letter dated 3rd January, 1884.

While these proceedings were in progress, the Committee received information to the effect that a legacy had been bequeathed to the Charity, and it was

rumoured that it was likely to be of considerable amount. It was therefore decided not to proceed with building operations for a time, in the hope that this legacy would come to hand and help towards providing for the necessary expenditure. Unfortunately, some delay has occurred in realising the testator's property, and the bequest has therefore not yet been received. Meanwhile, the number of patients continued to increase in an unprecedented manner, the number applying for admission during the March quarter of this year being 231, which is at the rate of 924 per annum, while in one month (March) the number presenting themselves was no less than 87, which is at the rate of 1,064 per annum. The pressure was so great, that some of the patients could not possibly be accommodated in the Hospital, and private apartments had to be hired for them in neighbouring houses, while some had to be sent to the Marylebone Infirmary. Under these circumstances, the subject was again considered by the Committee, and it was decided to proceed with the enlargement without delay, and to meet the expenditure by selling a portion of the invested funds of the Hospital. This step was not taken until after mature consideration by a large and thoroughly representative Meeting of the Committee of Management. That the Hospital was not large enough for the work it was called upon to do did not admit of discussion, and it was also tolerably clear that to continue to undertake to receive poor women presenting the order of admission, and then frequently every year to send many to the Parish Infirmary, is to dissatisfy the subscribers recommending them, to disappoint and wound the feelings of the patients themselves, and to do much to forfeit the confidence and support of the public. These were some of the considerations which led the Committee to decide to commence the work of enlargement forthwith, and to provide the means by selling stock. They had also strong reason to think that as the additional space would enable them to provide much greater and more comfortable accommodation for pupil nurses and midwives, these pupils would come to the Hospital for training in greater numbers; and, further, that adequate and more suitable provision for the training of medical pupils would be followed by a similar increase, especially as there are at the present time three applications by medical pupils for every two vacancies. If these expectations are verified by actual results, as there is every reason to believe they will be, the loss of revenue resulting from the sale of stock will be more than compensated for by the increase in the income derived from fees. Apart from these considerations, however, I cannot but think that this determination of the Committee to maintain the Hospital so that it shall be able to provide adequately for the reception of those deserving poor women for whose benefit it was founded, will meet with cordial recognition by the benevolent public, and

that, as was the case after the building of a new and larger Hospital in 1856, the charitable, seeing that the increase in the demands upon the Charity necessitate the provision of extended accommodation, will accord to the work an increased and adequate measure of support.

The extension proposed consists of the erection of a wing at the north or Marylebone Road end of the Hospital. The ground on that side between the railing and the end of the present building has a mean breadth of about 35 ft., and it is proposed to build to within about 10 ft. of the railing, so that the new wing will have a mean breadth of about 25 ft., while its length will be nearly 80 ft. The extent of the addition will be seen at a glance on referring to the plan on page 57. By this enlargement twelve extra beds for patients would be provided, and the capacity of the Hospital increased to between 900 and 1,000 patients per annum, in addition to which ample accommodation would be provided for the pupil nurses and other pupils, and such extra servants as would be required.

Having dealt with the various additions and improvements to the building erected in 1856, I will now return to the subject of the rebuilding itself, and the results which followed it.

Of course the opening of a larger Hospital was followed by an increase in the expenditure, which necessitated an augmented income. As a matter of fact the average annual expenditure for the next ten years was very nearly double that for the ten preceding. The income, however, it is very satisfactory to note, kept pace with it, indeed it did rather more, thus proving that the doubts of those who argued that, since the income was not equal to providing for the expenditure of the old small Hospital it was not to be expected that it would so improve as to be adequate to meet larger demands, were not well founded. Indeed it is extremely probable that a very great increase in public interest in the Hospital was occasioned by the rebuilding and the exertions made to provide funds for it. Some very large legacies were received about this time, which may fairly be attributed to this cause, and the average annual income from legacies in the following ten years was upwards of £600, whereas it had never before exceeded £250.

Speaking of legacies brings me to an extremely important matter which came to the front in connection with the largest of the bequests just referred to, that of Mrs. Kennedy Hutchisson, in 1860, three years after the opening of the New Hospital. By her will this lady bequeathed to Queen Charlotte's Hospital one-third of the residue of her estate, consisting of real and personal property. As the Charity was not incorporated that portion of the bequest which consisted of real property was void by the Statute of Mortmain. This was a most

untoward event, and led to the appointment of a special Committee to consider what steps could be taken to prevent the recurrence of such a loss. This Committee, having previously determined the necessity of obtaining either a Charter or Act of Incorporation, reported as follows :—

“The Committee appointed to consider the subject of obtaining an Act of Parliament for the Incorporation of this Charity, and to enable it to take, hold and sell lands and hereditaments, beg to report that being of opinion that such purposes would best be effected by an Act of Parliament, they have caused the requisite notices to be published of the intention to apply in the ensuing Session of Parliament for such an Act, and they recommend that they should be authorised to take such further steps as may be necessary to obtain it. They beg to add that their reason for preferring an Act to a Charter, although rather more expensive, is, that by the former the title to the present Freehold Property of the Hospital would be confirmed, and that it would not be so by Charter.”

The Governors and Subscribers at the Annual Meeting authorised the necessary steps to be taken, and a Bill was introduced into the House of Lords and read a first time. The Committee soon found, however, that there was no probability of carrying the Bill with the clause referring to landed property (their principal object), and they therefore thought it prudent to withdraw it, so as not to incur unnecessary expense.

In this year (1860) the Londesborough Samaritan Fund was formed. It was named after, and originated from monies given by, Lord Londesborough the President, who died the year before. Its object was to assist destitute patients with small sums of money on leaving the Hospital. The fund thus commenced has been maintained ever since, and is still in existence ; and though not so liberally supported as it deserves it is nevertheless a very valuable supplement to the good work done in the wards of the Hospital. There are no expenses of management connected with it, and therefore the whole of the contributions are applied to the objects of the fund.

In this year the “Metropolitan Railway Terminus Bill” was before Parliament, and as the Committee apprehended that if the erection of the proposed new Station at Chapel Street were sanctioned, the foundations of the Hospital building would be affected owing to the vibration caused by the trains, and further that the patients would suffer from the noise and the noxious gases emanating from the said Station, decided to oppose the passing of the Bill. This they did at a cost of £166, and they succeeded in having a special clause inserted in it providing for the prevention of such injury, and setting forth that if mischief did ensue, compensation must be made to the Trustees of the Hospital by the Railway Company.

In the same year Viscount Portman, one of the Vice-Presidents, was elected to the office of President, vacant by the death of Lord Londesborough. His Lordship had been a Vice-President for thirty-six years, during the whole of which time he had been one of the most constant and valued supporters of the Charity.

Late in 1861 the Committee, taking advantage of the Act of Parliament of that year for the regulation of Charitable Funds, had the Deed enrolled by which the real property of the Charity was held, and thereby set at rest any doubts which had hitherto existed with regard to the tenure of this portion of the Hospital property.

Dr. Metcalfe Babington, one of the Physicians, and Joint-Treasurer of the Building Fund with Mr. Charles Hawkins, died this year. In him the Charity sustained a great loss, not only on account of his most kind treatment of the patients for a period of twelve years, but because the funds of the Hospital were greatly benefited by his constant advocacy of its claims and necessities, more especially in connection with the rebuilding in 1856.

His Majesty the King of the Belgians, who had taken an active interest in the Charity and had been a generous contributor to its funds for upwards of thirty years, also died this year.

In 1866 Mr. Charles Hawkins, whose eminent services to the Charity have been previously referred to in connection with the rebuilding of the Hospital, resigned the post of Consulting Surgeon, which he had most ably filled for ten years. He had served on the Committee of Management previous to his acceptance of the office of Consulting Surgeon, and the Charity owes him a deep debt of gratitude for his great and successful exertions in its behalf during the time he was associated with it.

The year 1866 is memorable in the history of the Charity as the year in which Her Royal Highness the Princess of Wales accepted the office of Vice-Patron.

In 1867 the Hospital paid Poor Rates for the first time. Hospitals had up to that time been exempt from the impost, and efforts were made to relieve them from it again, but without success, although chapels, Sunday schools and ragged schools, scientific and literary institutions, and some lunatic asylums enjoy exemption at the present time. This is a glaring inconsistency and injustice, the effect of which is, as the *British Medical Journal* recently pointed out, that the Sick Charities are taxed, and very heavily too, to keep the sick poor in poor-law infirmaries.

During the year 1868, the Committee had under their consideration a question of some interest, namely, the training of women to act as midwives

for the army. The subject was brought before them by the Colonel of one of Her Majesty's regiments, and it was shown how valuable the services of such persons would be, and what a great want there was amongst the soldiers' wives of properly trained women to act in this capacity under the supervision of the surgeon of the regiment, or to be of service in an emergency. The Hospital authorities had always considered the wives of soldiers and sailors to have special claims upon it, and even so far back as 1809, when His Royal Highness the Duke of Sussex became President, this feature was specially referred to in the Laws of the Charity. The Committee, therefore, felt that the proper training of midwives for the army was a matter in which they were directly concerned, and an object which they should do everything in their power to advance. It was therefore resolved that "The Governors of this Hospital, in endeavouring to benefit the army of this country, are willing, on receiving a recommendation from the Commanding Officer of a regiment or dépôt, to receive as they can accommodate them, pupils for learning Midwifery, at half the sum usually charged, and to board the pupil during the time of tuition."

I have just referred to the circumstance that mention was made in 1809 of the fact that the wives of soldiers and sailors were considered to have special claims upon the Charity. In the Report for 1816 are found the following words:—"The wives, too, of those indigent brave men, whose lives are devoted to the service of their country by land or by sea, are more particularly considered as fit objects for the Charity's bounty." Further on it is stated that such poor women were relieved in large numbers during the wars with Napoleon. This feature of the Charity was not permitted to be overlooked, and we find it again utilised for the benefit of soldiers' wives while the war with Russia in 1854 to 1856, and the Indian Mutiny in 1857, were in progress. In the present year also (1885), when the operations in Egypt had occasioned the absence from home of large numbers of the men of both branches of Her Majesty's Service, the Committee communicated to His Royal Highness the Duke of Cambridge as the head of the army, and to the Secretary of the Admiralty on behalf of the navy, their readiness to receive into the Hospital or to cause to be attended by a midwife at their homes, the wives of soldiers or sailors engaged on active service in the East, without the formal Hospital "Letter," if holding a recommendation from such authority as the War Office or Admiralty might think fit to appoint. His Royal Highness conveyed to the Committee through the Quartermaster-General his acknowledgments and thanks "for the philanthropic decision they have come to to extend the benefits of that excellent Institution to the wives of soldiers now on active service in Egypt."

On the 13th November, 1869, Her Royal Highness the Crown Princess of Prussia (Princess Royal of Great Britain), attended by Lady Caroline Barrington and Dr. Gream, visited the Hospital and inspected the wards. Her Royal Highness expressed herself as being very pleased with what she had seen.

In 1870, during the war between France and Germany, there was considerable distress from various causes amongst the foreign refugees then in this country, and this fact prompted the Committee to place at the disposal of the Ladies' Committee of the Refugees' Benevolent Fund a number of letters of admission to the Hospital. These letters were thankfully received, and bestowed on such refugees as needed the benefits of the Institution.

In 1872 the principles of the administration of the Charity became the subject of special consideration, with the result that in a few years its internal organisation was entirely remodelled. The extent of its operations had increased so much since the rebuilding of the Hospital in 1856, that the laws then enacted for its management had become inadequate and inappropriate. The question was opened by Dr. Gream, the senior Consulting Physician Accoucheur, a Vice-President and a Trustee of the Hospital, with Dr. Hope and Dr. Grigg, the Physicians to the in-patients. In 1856, and for many years after, the number of patients admitted to the Hospital and the number of Nurses received for training were such that it was not beyond the capacity of one person to control the whole internal management, including the discipline of the inmates, the delivery and nursing of the patients, the training of the Nurses, and the conduct of the domestic arrangements; but the end of eighteen years found the number of in-patients doubled, and the work of training Nurses very much increased. This growth was such that it became impossible for the numerous duties alluded to above to be efficiently discharged by one individual, in addition to which it was most undesirable for one and the same person to perform the double duty of delivering the patients and nursing them during their lying-in. The changes recommended were the appointment of a Resident Medical Officer to take general charge of the patients under the Physicians, and of a Resident Midwife, who was to have the immediate care of the patients under the Resident Medical Officer, and whose duty it was also to be to instruct the Midwives and Nurses. These changes, affecting as they did the whole tenor of the internal arrangements, necessitated the alteration of the laws, and a Sub-Committee was therefore appointed to consider the whole matter, and to revise them. This they did after many meetings, and the revised code was approved on the 27th July, 1874. It embodied rules for the newly constituted offices of Resident Medical Officer and Resident Midwife, with many minor alterations and improvements, which it is not necessary to refer to

separately. With reference to these changes a subsequent Annual Report of the Committee says :—

“The Committee cannot refrain from reminding the subscribers that the placing of the Hospital in its present satisfactory condition, and the rescuing of it from its previous unsatisfactory state, is entirely due to the unwearied zeal and determined energy of Dr. Gream, who at great personal inconvenience finally succeeded in obtaining the sanction of the Governors to the retention of a scientifically trained Resident Medical Officer, by whose presence the Physicians “have been enabled to carry out the sanitary measures above referred to.”

The first of the new offices, that of Resident Medical Officer, proved a great success and it has remained unaltered to the present time : the appointment of Resident Midwife, however, was a failure. It will be noticed above that her duties were threefold—(1) The delivery of the patients, (2) the supervision of the nursing during their lying-in, (3) the instruction of the Nurses. This plan was tried for eighteen months, but the three duties were found practically incompatible, and they were accordingly separated. In addition to this it had become clear that by no precautionary measures could it be rendered safe to have the Midwife resident in the Hospital. It was therefore decided that the Midwife should live outside, but in the immediate vicinity of the Hospital ; an arrangement which, though theoretically surrounded by many difficulties, has been found to answer admirably ; her house is now connected by telephone with the Hospital, so she is practically always on the spot.

The finishing touches were not given to these new arrangements till 1879, when the supervision of the domestic affairs was entrusted to a new officer called the Housekeeper, leaving to the Matron the charge, under the Physicians and Resident Medical Officer, of the patients and the nursing department, duties that require her undivided energies if they are to be efficiently performed.

These extensive changes were not completed any too soon. At the time they were commenced (1872) they were necessary, though the number of patients admitted that year was but 433 and of pupils received about 50, while in 1880 the numbers of patients and pupils were 602 and 129 respectively. This is a very great increase, and it is not too much to say that if the administration of the Hospital had been continued on the old lines it must inevitably have collapsed. The changes have been proved to have effected much good. Some points may be mentioned. I have just said that the final step was taken in 1879. Since then the rate of mortality among mothers has been less than 11 per 1,000, while the previous average was nearly 28 per 1,000, and yet the number of patients received on the average during these five years exceeded the previous average by more than one-half, and the risks attending their

treatment were therefore correspondingly increased. Another highly satisfactory point is that the expenditure has been brought thoroughly under control, resulting in a material reduction in the cost per head of patients, nurses, and servants, although the prices of necessaries have increased.

In 1873 the Hospital Sunday and Hospital Saturday Movements, which had for years been established in Birmingham, Manchester, Liverpool, and elsewhere in the provinces, made their appearance in London. It has been said that the establishment of these funds has resulted in the withdrawal of subscriptions from the Charities; however that may be in other Institutions—and I am strongly of opinion that the statement cannot be substantiated—it is certainly not true of Queen Charlotte's Hospital. We have received in awards from the two funds a sum averaging annually above £200, and in the same period the Annual Subscriptions have increased from £686 to £1,057 per annum, which is a larger increase in this item of revenue than has taken place during any corresponding period since the foundation of the Hospital.

The work of the Charity was now proceeding very satisfactorily and great progress was made during the next few years. The structural improvements and additions made in 1878 have already been described. As a training establishment for Midwives and Nurses its advance was remarkable, the annual number of persons trained having increased fourfold within eight years.* There was also a very great increase in the number of patients provided for, both in the Hospital and at their own homes; the number in 1873 was 1,019, and by 1882 it had grown to 1,472.

Her Royal Highness the Crown Princess of Germany paid another visit to the Hospital in March, 1879. Her Royal Highness was attended by Lady Elizabeth Biddulph and Dr. Gream, and before quitting the Hospital made the following entry in the Visitors' Book: "much pleased with the arrangements of the Hospital I have just seen." Her Royal Highness's opinion of the Hospital will be understood from the fact that she has sent nurses from Germany on three occasions to train in the Institution, and her daughter-in-law, Princess William of Prussia, specially requested in 1884 that the In-patients' Midwife should be permitted two months' leave of absence for the purpose of going to Potsdam to attend Her Royal Highness in her confinement; and arrangements were accordingly made giving effect to Her Royal Highness's wishes.

In 1882 the Vestry of St. Marylebone were induced to pave the roadway

* For further particulars in connection with the Training School, see page 47.

on the north side of the Hospital with wood. The traffic along the Marylebone Road is very great, and the consequent noise was the source of much discomfort to the patients. Representations were made to the Vestry, and a deputation of the Committee of Management attended at the Court House to explain the grounds upon which their application to have the roadway paved with wood was made. As I have stated, their request was granted. The effect produced by the change was very noticeable. It had previously been difficult at times for anyone to make themselves heard in the wards at that end of the building without raising the voice; now this is no longer the case and comparative quietude has been secured.

On the 26th April, 1883, Her Royal Highness the Princess of Wales and Her Royal Highness Princess Christian, attended by Mrs. Francis Jeune, honoured the Hospital with a visit. Their Royal Highnesses, who were not expected, arrived at the Hospital at about a quarter before one o'clock, and remained about an hour, during which time they visited nearly every ward and also the Hospital Chapel. Their Royal Highnesses took great interest in the patients, to each of whom they spoke a few kind words. Before leaving, their Royal Highnesses wrote their signatures in the Visitors' Book, and were pleased to say that they were delighted with everything they had seen.

It will be remembered that in 1860, owing to the inability of the Charity to receive some real estate which had been bequeathed to it, an attempt was made to obtain an Act of Parliament incorporating the Institution, but without success. In 1881 the Committee learnt that a gentleman who had just died had bequeathed a legacy to the Charity, including a share of the proceeds of some real estate in New Zealand. This mention of real property in a bequest to the Hospital, brought the question of incorporation again to the front, and it was determined in 1884 to petition Her Majesty the Queen praying that a Royal Charter of Incorporation might be granted to the Hospital. A draft of the desired Charter was accordingly prepared by a Special Committee appointed for the purpose, and approved at a Special General Meeting of Governors. The Draft Charter and accompanying Petition were sent to the Hospital's Solicitors, and were by them duly lodged at the Privy Council Office on 4th December, 1884. On 1st June, 1885, a letter was received from the Home Office stating that directions had been given to take the necessary steps to cause Letters Patent to be passed under the Great Seal, granting a Charter of Incorporation to Queen Charlotte's Hospital; and requesting that the fees for the payment of the various stamp duties due to the Exchequer should be forwarded. This was accordingly done, and the Charter was duly received on


the 17th June, 1885. The Hospital is thereby constituted a corporate body by the name and style of the "President and Governors of Queen Charlotte's Lying-In Hospital," having perpetual succession and a Common Seal, and being capable in law, notwithstanding the Statutes of Mortmain and Charitable Uses, to acquire and hold real property of an annual value not exceeding £3,000.

This important event brings the history of the Hospital down to date, and I will now give a short account of the objects and present condition of the Charity.

CHAPTER III.

OBJECTS AND PRESENT STATE OF THE HOSPITAL.

Objects of the Charity—Government and Administration—Privileges of Governors and Subscribers—Remarks upon Privileges—Internal arrangements—Appointment of a Chaplain and the fitting up of a Chapel in the Hospital—Vaccination of children born in the Hospital—Paying Patients—Homes in connection with the Hospital—Tabular Statement of Homes—Remarks upon some results of the establishment of Homes—Out-Patient Department—Payment by Patients according to their means—Foundation and progress of Midwifery Training School—Finance—Inadequacy of Income—Result to the Hospital of the establishment of the Hospital Sunday and Hospital Saturday Funds.

HE objects of the Charity are to receive into the Hospital for their confinement poor married women, widows giving birth to posthumous children, and deserving unmarried women with their first child; to provide married women at their own homes with a skilful midwife to attend them in their confinements; and to train Medical Pupils, Pupil Midwives, and Monthly Nurses.

Although not one of the objects of the Charity, it has long been customary to provide facilities for ladies requiring Wet Nurses to obtain them at the Hospital on payment of a small fee. Many ladies are accommodated with Wet Nurses in the course of the year, and the Hospital is in this way a great convenience.

The affairs of the Charity are administered by a Committee of Management consisting of not less than twenty nor more than thirty Governors. The Committee meet once a month, and at each monthly meeting two of their number, the Visitors, are appointed, in whose hands the conduct and control of the Hospital is placed during the period between the meetings of the Committee. Under them the Secretary has the direction of the civil department of the Hospital, the control of expenditure, and the preservation of order and discipline. The medical and nursing department is in the hands of the two Physicians to the in-patients, one of whom visits daily. Under the Physicians are the Resident Medical Officer, who has immediate charge of the patients, and the Matron, who, subject to the Physicians in the same manner, is responsible for the nursing.

The domestic arrangements and the control of the domestic servants are in the hands of the Housekeeper.

The privileges of Governors and Subscribers are as follows: annual subscribers of £3 3s. or donors of £31 10s. are qualified for election as Governors, and are entitled to recommend two in-patients and three out-patients every year; contributors of larger sums are of course qualified to be elected Governors, and their power of recommending patients increases in proportion to the amount of the contribution. Annual subscribers of £2 2s. or donors of £21 are entitled to recommend one in-patient and two out-patients, and annual subscribers of £1 1s. or donors of £10 10s. to recommend four out-patients, annually. Contributions of less amount do not entitle the contributor to any privileges.

From 1809 till the rebuilding of the Hospital in 1856, contributors were not entitled to privileges to the same extent as at present. For example, a donation of £31 10s. constituted the donor a Governor as now, but only entitled him to recommend one in- and six out-patients per annum, whereas a donation of this amount now empowers him to recommend two in- and three out-patients every year. These two in- and three out-patients cost the Charity much more than one in- and six out-patients would, even now, and the difference will be seen to be much more considerable when we remember the cost of necessaries before 1856 compared with the cost at the present time. I shall certainly not exaggerate if I say that the value of the privileges now attaching to contributions is at least double what it was before 1856, especially when it is borne in mind, that not only was the cost of the patients less than now, but, from the same causes, a donation of £31 10s. was, so to speak, a larger donation. The present scale of privileges will be readily understood from the following illustration.

An Annual Governor gives the Charity £3 3s. every year, and if he exercises his privilege sends two in-patients, costing the Charity about £4 each, and three out-patients, costing 6s. each—total cost £8 18s.; so that his privileges exceed in value the amount of his subscription by nearly £6 per annum. If every subscriber exercised to the full his power of recommending patients the resources of the Charity would soon be exhausted and bankruptcy ensue; fortunately they do not—though the proportion who do is annually increasing—yet there is nothing to prevent them from doing so if they choose, and I cannot help thinking that subscribers' privileges should be brought somewhat more in conformity with the amount of the contribution.

The patients on admission are received in the Labour Ward, where the confinement is conducted by the Midwife to the in-patients or her Assistant,

attended by a Nurse. The Resident Medical Officer has no duty in connection with the confinement if natural, but is at hand if anything abnormal should occur. As soon after the confinement as is desirable, the patient is wheeled in her bed to the Lying-In Ward, which has been prepared for her reception, and there removed to a fresh bed. The Lying-In Wards accommodate two patients each, and a Nurse is set apart for each ward. Here the patients remain till they leave the Hospital, which they do on the average after fourteen days' stay. There is an experienced Head Nurse called a Sister, on each floor, who has the charge of the patients there, and whose duty it is to see the directions of the Physicians and Resident Medical Officer carried out, to instruct the Nurses, and see that they are attentive to their duties.

There is a small Chapel in the Hospital, where married patients who wish may be churched before leaving, and unmarried women attend to offer prayers and thanksgiving suitable to their circumstances, and where their infants may be baptised. The Chaplain frequently visits the patients, and his ministrations are, in the great majority of cases, most gladly received. Sunday services are held regularly in the Chapel for the household, and Holy Communion is celebrated every Monday morning. The appointment of a Chaplain who could give regular services, in 1881, and the fitting up of a Chapel in the following year, have been attended with very happy results, and the Committee regard the change with very great satisfaction. It is one of the most important improvements ever made in the administration of the Hospital.

No patients are discharged except by the order of one of the Physicians, and each patient immediately before quitting the Hospital is taken before the Matron, who sees that proper provision is made for her safe conveyance to her friends. The Samaritan Fund, and the gifts of linen sent by thoughtful friends, are of great service when patients are leaving. In bad weather, or if the patient is weaker than usual, or has a long distance to go, the former enables the Charity to provide a cab to convey her safely to her destination, or, if the patient is very needy, to give her a small sum to provide for her immediate pressing necessities; while the latter, in the numerous instances where the patient is inadequately clothed, or has been unable to provide clothing for her infant—or both, as is often the case—provides partially, if not entirely, for the deficiency. Neither the Samaritan Fund nor the presents of linen are sufficient to meet fully the numerous demands upon them, but still they are of very great service.

In addition to the ordinary patients, it was decided some years ago to permit women to be received, if there is room, who, either because it is inconvenient for them to be confined at home, or because their case needs

special attention, wish to enter the Hospital for their confinement. These cases have to make written application to the Committee, explaining their circumstances and the reason they wish for admission to the Hospital, and they are required to pay not less than £5 5s. for the privilege. Such cases are not very numerous, probably not more than about four per annum on the average.

The number of in-patients treated annually has averaged, for the past three years, 710. The growth of late years has been very great, quite out of proportion to anything that has gone before. The average for 1872-4, for instance, was 431, so the growth in the ten years intervening was equal to sixty-five per cent., whereas if we go back another ten years and compare the average with that for 1872-4, we find the figures are 374 and 431, which shows an increase in that case of not quite sixteen per cent. The growth still continues and at an accelerated speed, for the number of patients admitted in 1884 was 775, while the number in the March quarter of the present year was no less than 232, which is at the rate of 928 per annum.

For many years it had been noticed by the Local Government Board that owing to the impossibility of tracing most of our patients, especially the unmarried women, after they leave the Hospital, in the majority of cases the children were not vaccinated.*

In 1881 some correspondence took place on the subject between the Board and the Committee of Management, which resulted in the Hospital being constituted a Vaccination District, and one of the Physicians being appointed Public Vaccinator to the district thus created. At the same time the Committee passed a Resolution enacting that every child born in the Hospital must, if in a fit condition, be vaccinated before leaving. Since that time the infants have been regularly vaccinated. Wednesday is the day on which the vaccinations are performed, the arms being inspected on the Wednesday following. Since the introduction of the system no less than 2,500 children have been vaccinated in the Hospital.

This description of the in-patient department of the Hospital would be incomplete without some mention of the Homes, which have sprung up in

* The following is a copy of a communication which was received by the Committee from the National Vaccine Establishment at the end of the year 1817.

"NATIONAL VACCINE ESTABLISHMENT.—At a Board, 13th November, 1817, Dr. Latham, President, in the Chair, it was Resolved: 'That it is the opinion of this Board that it would conduce towards the extermination of the Small-Pox, and consequently be the means of saving many lives, if the Governors of the different Lying-In Hospitals in the Metropolis would request their Surgeons to vaccinate the infants before they leave the Hospitals, and not to trust that operation to the caprice of the parents.' Resolved, 'That the above Resolution be transmitted to the various Lying-In Hospitals.'

"By order of the Board. (Signed) JAMES HERVEY, M.D., Registrar."

recent years, and whose mission it is to reclaim single women who have fallen for the first time. The fact that the unmarried women when discharged from the Hospital with the additional burden of a new-born child are unfit for active work, and the knowledge that in most cases they are nearly destitute, with no friends, and hence but too likely to be driven to fresh sin and misery and perhaps to crime, suggested twenty years ago to some kind and benevolent persons who were interested in the work of the Hospital, that the establishment of a Home where such women would be received on their discharge from the Hospital, would be the means of doing much good. The project was submitted to the Committee, who cordially approved of it and promised their hearty co-operation. This, the first "Home" established in connection with the work of the Hospital, was called the "Magdalene Home," and was opened in 1865, at No. 30, Weymouth Street. Its objects were to receive unmarried women leaving the Hospital, for a period of one month; to find suitable employment for those able to work, means being taken to watch over their future career; to establish an Infant Home for the children of such as proved worthy of future assistance, the mothers in all such cases to contribute towards the support of their children; and to obtain the services of a Visiting Chaplain, who, in conjunction with the Lady Superintendent, should administer religious instruction to the women. The house in Weymouth Street could not be permanently secured, and owing to the difficulty of obtaining suitable premises in a convenient situation, the Home was closed in 1867. In 1868, however, a suitable house was acquired at 14, Ranelagh Road, Paddington, where the work was recommenced, and where it has been in active operation ever since. Other Homes of a similar kind have been since established, and there are now four working in connection with the Hospital, though under separate and independent management, beside which there are several other Homes not specially related to our Hospital, but from whom patients in considerable numbers are received. The subjoined tabular statement gives the principal Homes, including those who work only in connection with Queen Charlotte's Hospital patients, as well as those who do not, and contains many interesting particulars concerning them. Nine Homes are mentioned, and the latest in date is Queen Charlotte's Convalescent Home, opened in 1882, by Mrs. Charles Roundell, which is the single one that only receives patients *after* leaving the Hospital. Mrs. Roundell was permitted to call it Queen Charlotte's Home, on condition that it was exclusively devoted to the reception of women who had been patients of Queen Charlotte's Hospital. During the two years and ten months it has been working 172 patients have been received after their discharge from the wards of the Hospital, and the Home has been of much service to the Hospital in many ways.

NAME, ADDRESS, DATE ESTABLISHED, AND NAME OF MANAGER.	OBJECTS, &c., AND AVERAGE ANNUAL NUMBER ADMITTED.	NATURE OF CONNECTION WITH QUEEN CHARLOTTE'S HOSPITAL.	WHETHER WOMEN ARE ADMITTED BEFORE CONFINEMENT, IF NOT—WHICH?	TERMS OF ADMISSION—AMOUNTS NOT REQUIRED, &c.	THE YEAR IN WHICH ESTABLISHED	REMARKS.
Queen Charlotte's Convalescent Home, 29, Victoria Road, Kilburn, N.W. Mrs. CHAS. ROUNDSELL. (1882)	To provide a temporary refuge for single women with their first child, who on leaving Queen Charlotte's Hospital, are too weak to return to service, and who have no friends who will receive them. Average number received, about 60.	Exclusively devoted to the reception of women who have been patients of Queen Charlotte's Hospital.	After confinement only.	A small weekly payment expected, the amount depending upon circumstances.	1883	Cost of maintenance probably about £400 per annum.
St. Mary Magdalene's Home, Ranelagh Road, Paddington, managed by a Council of which the Rev. R. T. WEST is Chairman. (1865)	To endeavour to rescue those who have once fallen, to aid them in obtaining situations, and to assist them in placing their children out to nurse. Average annual number received, about 25.	All women entering the Home before confinement go as patients to Queen Charlotte's Hospital.	Both before and after confinement.	Required to pay 10s. per week before admission to Hospital, and 5s. per week after. Must agree to remain 12 months, and be of previous good character.	17	Cost of maintenance in 1883 £763, towards which inmates contributed £318.
Temporary Home for Friendless Women, 115, Crawford Street, W. (1868)	To afford shelter and protection to single women who have fallen a first time and to help them to find situations. Average annual number admitted, about 60 to 70.	Almost entirely confined to patients of Queen Charlotte's Hospital.	Both before and after confinement.	Must produce evidence of previous good character, pay 2s. 6d. per week, and provide own food, &c.	31	Ordinarily patients only remain about 6 weeks.
Home for Single Women, who have fallen for the first time, 3, Somerset Terrace, Carlton Road, W. FRANCIS JEUNE. (1865)	To provide a home for women who have fallen for the first time, and who need a refuge, and to endeavour to procure situations for them. Average annual number, 180.	Almost all the women become patients of Queen Charlotte's Hospital.	Both before and after confinement.	Required to pay 5s. per week before confinement and 7s. per week afterwards with child.	40	
Workhouse Home, 2, Snowdon Villas, Carlton Road, N.W. Hon. Mrs. FRANCIS JEUNE. (1863)	To relieve women who are destitute and have fallen for the first time. Average annual number received, 85.	About half the number received become patients of Queen Charlotte's Hospital.	Both before and after confinement.	Free if quite destitute, 5s. per week if able to pay.	46	Cost of maintenance about £950 per annum, to which inmates with 30 shillings makes pay about £440.
Home for Deserted Mothers and their Children, 35, Great Corn Street, W.C. Mrs. RUSSELL GURNEY. (1863)	To provide a temporary home for women after their first fall, and to help in boarding children out when mothers are placed in service. Number received in 1884, 137.	Patients are frequently sent to Queen Charlotte's Hospital for their confinement.	Both before and after confinement.	Required, if able, to pay 5s. per week.	25	Cost of maintenance in 1883 £1,450, towards which inmates contributed £735.
St. Cyrilian's, Beth Esda, 7, Allsopp Mews, Dorset Square, N.W. Rev. C. GUTCH. (1879)	Reformation of girls of the servant class under 16 years of age. Average annual number received, 18.	Girls are sent to Queen Charlotte's Hospital for their confinement, from time to time.	Both before and after confinement.	Must be willing to remain as long as is considered necessary, and must pay 5s. per week.	4	
St. George's Home, 4, Mount Row, W.	To receive girls under 20 years of age, after a first fall. No information.	Inmates generally become patients of Queen Charlotte's Hospital. Inmates are frequently sent to Queen Charlotte's Hospital for their confinement.	Both before and after confinement.	Must stay 12 months, and pay 3s. per week. No information.	6	
The Anchorage, Loudoun Road, St. John's Wood, N.W. Colonel STUART WORTLEY.						

This statement brings out one or two points which call for remark. First, it appears that 190 women were received into the Hospital from these Homes for their confinement during last year, and it is a fact that a very considerable number of these unmarried women came from the country. Now these women, before the existence of the Homes, could not have availed themselves of the benefits of the Hospital because they could not travel long distances immediately before their confinement, and few, if any, would journey to London some weeks previously on the chance of finding suitable lodgings at such a rate as would suit their means, in the neighbourhood of the Hospital, especially when they came to reflect that respectable people do not care to receive such cases. It is therefore pretty clear that the establishment of Homes has placed the benefits of our Hospital within the reach of women living in the provinces, and has thus resulted in a considerable increase in the number of our patients. The second point that I wish to refer to is that 71 unmarried women were received into Queen Charlotte's Home on their discharge from the Hospital, and if to this figure we add the 190 who returned to the Homes whence they came, we find that 261 out of a total number of 505 single women received into the Hospital last year, were taken in hand on their leaving the Hospital, and efforts made to induce them to lead better lives, to provide them with respectable suitable employment, and to assist them in placing their children in safe custody. More than half our unmarried patients were thus provided for, and this proportion represents very nearly the whole of those who had no friends, or whose friends had turned their backs upon them, as most of the remaining 244 left the Hospital with their parents, relatives, or friends. These remarks tend to show how complete is the work performed jointly by the Hospital and the Homes. Unmarried women, who in the time of temptation have fallen, are in need of twofold assistance—an asylum at the time of their confinement, where skilful nursing and proper nourishment will be provided, and then a home where they can recruit their strength, and where every effort will be made to induce them to endeavour to redeem the past and to make a fresh start in life. The Hospital provides the one, and the Homes the other, and the whole aim and purpose of Charity is thus fulfilled.

In the out-patient department the deliveries are conducted by able and experienced Midwives, whose duty it also is to wash and dress the infant at the birth, to see the patient within twenty-four hours of delivery and for two successive days besides, and also to pay not less than three visits within the next nine days—six visits in all.

There is an Out-patient Physician under whose direction the Out-patient Midwives work, and who is sent for by them if anything abnormal should occur

in connection with the confinement or the lying-in of the patients. The annual average number of out-patients is at present 830, and the number of Midwives appointed to attend them is five. The limits within which out-patients are at present attended are not strictly defined, but the circuit between Kilburn on the north, Regent's Park and Baker Street on the east, Oxford Street and Uxbridge Road on the south, and Latimer Road and Kensal Green on the west, is, roughly speaking, the extent of the Out-patient District.

In 1883 it was suggested to the Committee that the system of inviting all patients to contribute a little towards the funds of the Charity—which had been introduced and found to work satisfactorily at several Metropolitan Hospitals—might be adopted, with the object of promoting thrift and providence among those seeking the assistance of the Charity. The matter was considered, with the result that the principle of voluntary payment by patients according to their means was adopted; and at the Half-Yearly General Meeting in June the following clause was added to the Laws of the Hospital: "All patients, both in and out, who are able to do so, shall be invited to contribute something according to their means towards the funds of the Hospital, subject to such rules as the Committee of Management may make from time to time." It was specially stipulated that the payment was to be voluntary, and that there was to be no distinction whatever as to accommodation or treatment whether the patient paid or not, and it was arranged that the scheme should come into operation on 1st January, 1884.

This arrangement was carried out, and the result of the year's trial has been that nearly a hundred of our patients contributed when invited, and expressed pleasure in doing so. It is likely that when the adoption of the principle becomes better known, a greater proportion will be found ready and willing to help if their means will permit them.

It will have been noticed that one of the objects of the Charity is the training of pupils in Midwifery and Monthly Nursing. This branch of the Hospital work was commenced in 1851. In that year Nurses were first received for the purpose of being trained, and as the number of those who entered rapidly increased, the training was extended to women who desired to qualify themselves as Midwives. The opportunities afforded continued to be taken advantage of by women in increasing numbers, and in 1874 the Hospital was rendered accessible to medical men who were desirous of devoting special attention to Midwifery, and a Training School for Medical Pupils, Midwives, and Monthly Nurses was established. Since its establishment upwards of 1,200 persons have passed through a course of instruction, and the School has become a flourishing Institution. Its progress during the last five years has been

remarkable; the average annual number of pupils having been 164, against an annual average of 74 for the preceding five years. The period of training for the Nurses is eight weeks; they live in the Hospital during the time, and are instructed mainly by the Matron and the Sisters. The practical instruction thus received is supplemented and perfected by a course of lectures given by the Physicians. One lecture per week is given, and every Nurse, except in cases of emergency, is required to attend, so that each Nurse is present at eight lectures. The Nurses pay a fee of £10 10s. for the eight weeks' training and an additional fee of 10s. 6d. for the course of lectures—£11 os. 6d. in all. At the end of her term, if approved by the Physician, each Nurse receives a Certificate of her competence to act as a Monthly Nurse. The Pupil Midwives receive their practical training from the In-patient Midwife; they also receive regular instruction from the Resident Medical Officer, and have to attend a course of twelve weekly lectures given by the Physicians. They pay a fee of £26 5s., which includes £1 1s. for the course of lectures. On the completion of their period of training they undergo an examination by both Physicians, and if they acquit themselves satisfactorily, receive a diploma qualifying them to act as Midwives. The Medical Pupils generally attend for shorter periods, their object being, in the majority of instances, to attend the number of Midwifery cases required by the various examining bodies. They are instructed by the Physicians and the Resident Medical Officer.

The progress and present state of the Charity from a financial standpoint will probably be best understood by an examination of the table on pages 60 to 62. This table extends over a period of seventy-five years from the date of the re-constitution of the Charity to the present time. It has been compiled with great care, on a uniform basis, so as to furnish a complete and accurate view of the fiscal affairs of the Hospital, arranged in such a manner as to facilitate comparison. There are, however, one or two features which it is desirable should be explained. Since the institution of the Training School, and more especially in the past five years, during which it has assumed such considerable proportions, it has become impossible, owing to the cost of board, &c., of these pupils being included in the accounts of expenditure, for anyone except those immediately engaged in the administration of the Institution to know what proportion of the total expenditure relates to the Hospital as such, and what to the Training School. For this reason I will devote a few words to this point. It will be seen that the total expenditure during these five years has averaged £4,650 per annum, and I estimate the annual expenditure on account of the Training School to have been £1,250, and that of the Hospital £3,400. Now we will turn to the revenue and we shall find the

total Annual Income on the average to be £4,560, but if we deduct the income accruing from pupils' fees, which has averaged £1,877 per annum, we shall find the Charitable Income, if I may so call it, to be only £2,683. We thus see, on the one hand, that the income from the Training School has sprung in five years from an insignificant amount to £2,000 per annum, and on the other that, while the demands upon the Charity have increased quite sixty-five per cent., the support accorded to it by the public has not augmented. It is necessary to explain in this connection that what is described as voluntary contributions—*i.e.*, annual subscriptions and donations—have improved materially—some £400 per annum; but this satisfactory point is counterbalanced by a great falling off in the amount of legacies. This item averaged for the ten years 1869 to 1878 nearly £900 per annum, but has fallen during the last five years to £264, an annual loss of nearly £650. This falling off in the amount received from legacies is a very serious feature in the affairs of the Charity. It has resulted in an annual deficit of about £500, to meet which it would have been necessary to sell out that amount of the invested funds of the Hospital every year—which would speedily have swallowed up our very small funded property—had it not been for the profit on the Training School, which was applied to liquidating this deficit. This application of the Training School surplus to provide for the deficiency in the Hospital Revenue is much to be deprecated. It is absolutely essential if the School is to be maintained and improved that considerable sums should be expended in providing better accommodation for the pupils and for many other necessary purposes. If the present profits are otherwise appropriated and are not therefore available for the consolidation and extension of the Training School, the progress of this most important branch of the work of the Institution will be retarded, and before long there will be no surplus to apply.

It is not satisfactory but is nevertheless the fact that although lying-in hospitals are the oldest and most necessary of the special Hospitals—although they succour a greater number of individuals for a given expenditure than any other kind of Hospital, although Queen Charlotte's is the largest in Great Britain and provides for the delivery of nearly 1,700 poor women every year—yet it is not adequately supported, but has to face an annual deficiency of £500. It is also worthy of mention that owing to its situation in the W. district of the metropolis, its work comes more immediately under the notice of the wealthy than is the case with the other lying-in hospitals. The dwellings of its patients in Marylebone, Paddington, Bayswater, and Kensington may be described as next door to the mansions of the aristocracy, and it might be expected that this fact would tend to secure for it an adequate

measure of support. Another result of its situation is that it is particularly convenient for ladies needing the services of Monthly Nurses or Wet Nurses. It is calculated that not less than 600 ladies visit the Hospital in the course of the year for this purpose. They are thus brought into direct contact with the work of the Charity, and derive very material benefit from it, and yet the Charity has not benefited to the extent of more than £10 per annum—over and above the fee of 10s. 6d., which is charged in each case for the time and trouble devoted by the Matron to this business—from it. The simple fact that ladies—themselves mothers—visit the Hospital, secure the services of its patients, and thus acquire a personal knowledge of the good work it does, would seem to justify one in concluding that frequent contributions to its funds would result. Enquiry, however, would soon convince him of his error.

In spite of the falling off of legacies of late years the Committee have been careful to invest such as have been received, and have thus maintained, and even slightly increased, the income derived from dividends, which with annual subscriptions constitute the only revenue which can really be considered reliable, every other class of income being subject to great and sudden fluctuation.

Before quitting the subject of finance, I wish to call attention to the benefit derived from the Hospital Sunday and the Hospital Saturday Funds. From the time of the establishment of these Funds in 1873, awards amounting to £2,530 have been received by this Charity, which is equal to £211 per annum. The Hospital never received anything like this amount from Charity Sermons, not even in the days when, owing to the powerful influence of His Royal Highness the Duke of Sussex, the eloquence of the pulpit was more frequently employed in its behalf than has ever since been the case.

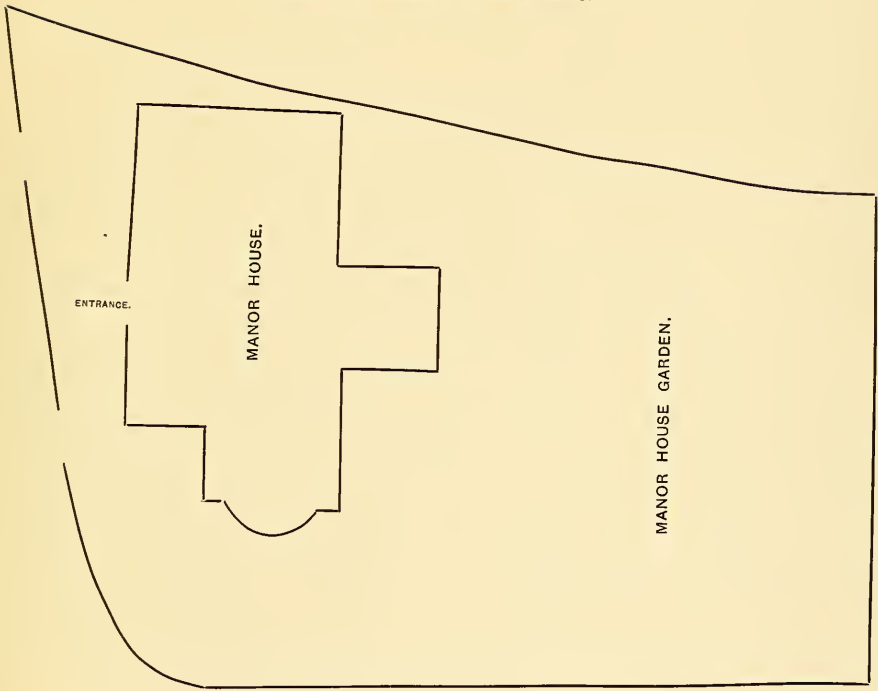
With these remarks I will conclude, as the table before referred to will afford full particulars.

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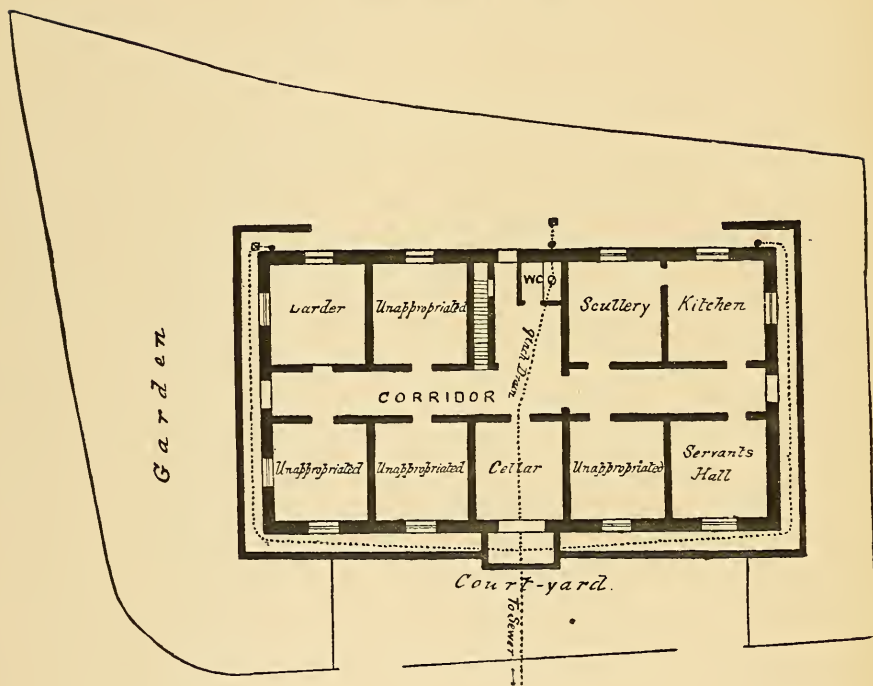
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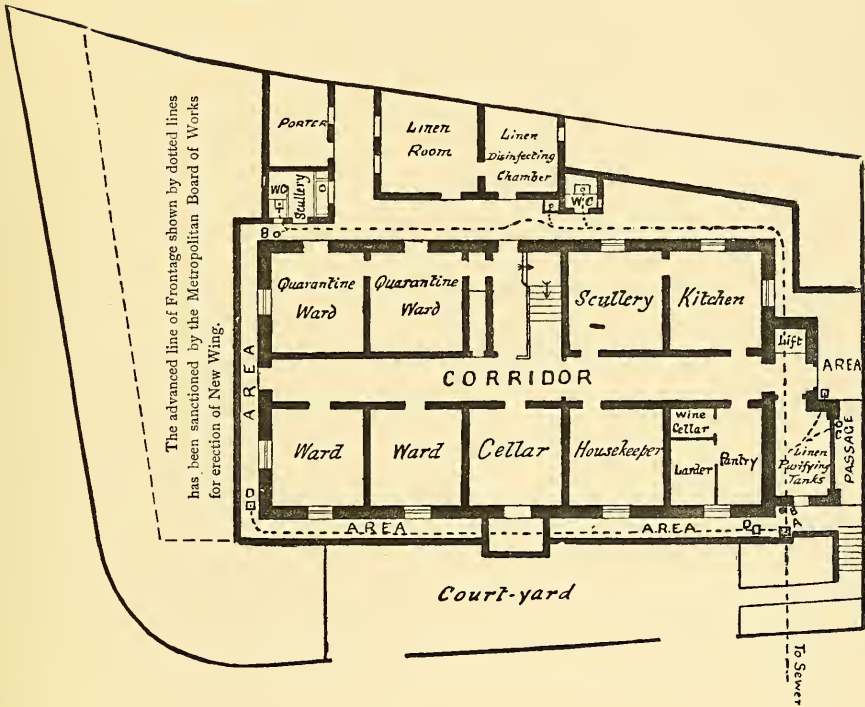
GROUND PLAN OF THE HOSPITAL, AS REBUILT IN 1856.

Showing the position of the Drains.

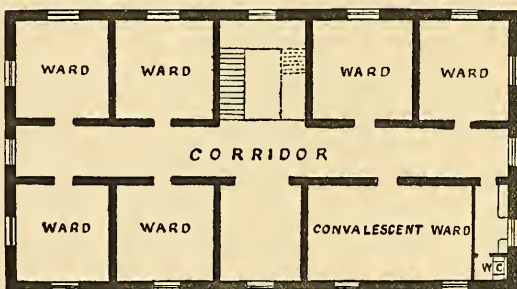


GROUND PLAN OF THE HOSPITAL IN 1885.

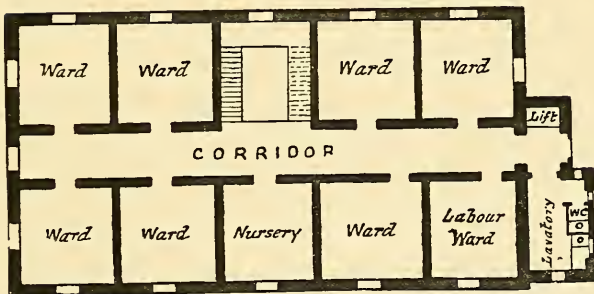
Showing the position of the Drains, and extent of New Wing.



PLAN OF 1ST AND 2ND FLOORS OF HOSPITAL AS REBUILT IN 1856.



PLAN OF 1ST AND 2ND FLOORS OF HOSPITAL, 1885.



TABLE,

Showing the number of Patients admitted to QUEEN CHARLOTTE'S HOSPITAL, the number attended at their own homes, and the total number relieved in both departments, in each year from 1809 to 1884, inclusive; also the Annual Income and Expenditure for the same period, exhibiting separately the Revenue derived from each class of Income and separating Ordinary from Special Expenditure; with the Annual Averages of Relief, Income, and Expenditure for each of the seven decades 1809—1878, and for the sexennial period 1879—1884.

NO. OF PATIENTS.		INCOME.										EXPENDITURE.									
		In-Pa- tients.	Out-Pa- tients.	Total.	Annual Subscrip- tions.	Donations and Awards of the Sabbath Fund.	Dividends, Rents, &c.	Legacies.	Euph's Fees.	Proceeds of Sermons and of Hospital Sunday Fund.	Patients' Payments.	Other.	Total.	Ordinary.	Extraordinary. Building, &c.	Total.					
					£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.					
1809	97	121	414	0	0	225	8	0	16	0	0	75	0	0	738	18	0	776	8	6	
1810	180	102	215	476	16	0	618	6	38	12	11	564	7	3	758	11	7	758	11	7	
1811	181	145	123	268	59	6	494	18	90	9	9	163	10	7	945	17	11	945	17	11	
1812	154	119	273	724	5	0	141	18	6	0	0	13	13	0	1487	15	4	957	0	10	
1813	155	115	270	518	17	0	74	6	29	4	7	...	...	...	746	14	4	746	14	4
1814	181	131	236	663	3	0	276	15	13	0	0	27	6	0	1042	16	0	669	12	8	
1815	180	119	279	556	3	0	240	15	38	14	11	13	13	0	883	7	0	784	5	5	
1816	181	156	269	291	6	0	201	2	21	18	6	...	...	...	806	6	0	806	6	0
1817	131	129	260	342	2	0	467	5	48	17	7	12	12	0	999	7	6	999	7	6	
1818	138	138	303	639	7	6	113	12	0	0	5	13	13	0	930	12	11	868	16	6	
1819	1397	1196	2593	5185	5	6	2854	14	5	464	19	80	17	0	10095	13	5	8313	0	11	
1820	140	119	259	518	10	7	285	9	5	46	10	8	1	8	10919	11	4	831	6	1	
1821	149	172	321	506	15	0	289	19	6	33	18	13	13	0	844	5	10	902	16	6	
1822	168	192	360	440	4	0	74	4	47	9	10	...	...	...	701	5	10	730	11	4
1823	150	207	357	477	12	0	443	14	0	16	10	13	13	0	1719	6	10	1081	3	8	
1824	163	277	440	504	19	0	194	4	137	12	0	27	6	0	972	2	9	742	10	7	
1825	164	342	506	494	14	0	267	18	6	56	0	13	13	0	952	5	6	780	16	4	
1826	141	267	408	338	2	0	28	10	175	1	9	13	13	0	887	3	4	1356	18	4	
1827	188	432	620	449	5	0	106	0	135	10	0	46	4	0	891	3	9	699	4	11	
1828	234	341	665	525	2	6	50	0	159	0	10	27	6	0	1064	14	0	875	6	5	
1829	230	394	624	424	19	6	437	0	155	0	0	4	4	0	847	10	0	934	3	7	
1830	1763	2904	4667	4585	7	6	3953	16	1	1112	3	237	6	0	12833	2	10	8566	8	1925	
1831	176	251	467	458	10	9	395	7	7	111	4	24	14	7	12833	3	5	856	12	1	
1832	221	379	600	434	2	6	618	1	2	157	5	0	0	0	796	18	6	958	9	4	
1833	236	371	607	401	8	6	516	1	0	150	10	...	...	...	1015	11	4	945	6	7
1834	223	386	609	363	0	0	259	18	0	150	10	0	0	0	958	3	15	973	8	7	
1835	198	358	556	349	3	0	...	...	...	...	...	...	...	...	911	4	0	94	11	0
1836	180	354	464	322	9	0	311	6	0	123	0	0	0	0	801	15	5	107	11	0	
1837	160	286	446	322	2	0	21	10	100	0	0	73	2	0	723	6	4	46	3	4	
1838	163	226	389	311	0	0	145	0	100	0	0	...	...	...	774	10	6	828	7	10
1839	215	275	492	424	3	0	84	14	100	0	0	103	17	6	653	2	0	772	0	8	
1840	215	275	492	424	3	0	84	14	100	0	0	...	...	...	653	2	0	772	0	8
1841	202	335	537	391	0	0	608	7	5	0	0	35	6	0	1129	7	0	842	9	6	
1842	1967	3276	5243	3953	19	0	1962	19	8	1442	15	80	13	3	8442	12	5	8520	14	0	
1843	197	327	524	395	7	11	196	6	0	144	5	8	1	4	844	5	3	852	1	5	

† Nine months only (1st April to 31st December).

NO. OF PATIENTS.			INCOME.										EXPENDITURE.								
In-Patients.	Out-Patients.	Total.	Annual Subscriptions.	Donations and Awards of Hospital Saturday Fund.	Dr-Hands, Burses, &c.	Legacies.	Papists' Fees.	Proceeds of Sermons and Awards of Hospital Sunday Fund.	Other.	Total.	Patients' Payments.	Other.	Total.	Ordinary.	Extraordinary Building, &c.	Total.					
£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.					
1839	205	327	405	0	72	0	0	0	0	0	0	0	0	179	9	11	779	9	11		
1840	199	303	413	2	305	12	0	0	0	0	0	0	0	90	1	4	852	15	9		
1841	222	331	553	4	128	0	0	0	0	0	0	0	0	266	1	7	1,862	16	3		
1842	192	329	541	4	127	15	0	0	0	0	0	0	0	762	1	8	1,869	11	7		
1843	197	306	503	4	405	7	0	0	0	0	0	0	0	759	15	0	1,869	11	7		
1844	204	358	492	19	0	115	2	0	0	0	0	0	0	757	16	0	1,869	11	7		
1845	187	365	469	3	52	10	0	0	0	0	0	0	0	869	18	6	1,869	11	7		
1846	190	326	377	9	0	137	15	0	0	0	0	0	0	716	1	9	1,869	11	7		
1847	172	326	392	14	0	12	2	0	0	0	0	0	0	740	17	2	1,869	11	7		
1848	161	284	445	4	19	15	0	0	0	0	0	0	0	795	7	4	1,869	11	7		
1849	161	282	443	0	297	7	0	0	0	0	0	0	0	795	7	4	1,869	11	7		
1850	152	247	399	376	8	0	147	4	6	0	0	0	0	786	16	5	1,869	11	7		
1851	179	311	391	380	12	6	83	10	0	0	0	0	0	786	16	5	1,869	11	7		
1852	182	317	398	364	2	0	75	0	0	0	0	0	0	757	6	5	1,869	11	7		
1853	177	292	399	365	8	0	20	10	0	0	0	0	0	742	2	6	1,869	11	7		
1854	213	390	403	373	5	0	139	11	10	0	0	0	0	772	1	1	1,869	11	7		
1855	170	199	369	361	17	0	5	0	0	0	0	0	0	715	1	6	1,869	11	7		
1856	188	225	313	405	7	0	125	10	11	15	3	782	13	4	17	0	1,869	11	7		
1857	245	236	481	489	1	0	788	2	0	143	2	7	0	825	15	0	1,869	11	7		
1858	341	230	571	500	4	0	283	16	0	112	10	0	0	1,012	4	10	1,869	11	7		
1859	320	270	590	468	15	6	1,820	10	0	1,418	1	2	331	4	10	360	0	6	1,869	11	7
1860	256	297	553	479	6	0	52	10	0	1,41	16	1	351	2	6	36	0	1	1,869	11	7
1861	369	350	719	492	3	0	194	5	8	4,299	0	0	0	87	15	0	1,869	11	7		
1862	351	381	732	508	4	0	284	10	7	88	8	104	5	0	0	0	1,869	11	7		
1863	386	374	759	498	7	0	296	3	9	0	90	15	0	0	0	0	1,869	11	7		
1864	378	374	752	498	7	0	185	10	0	114	13	1	8	9	0	0	1,869	11	7		
1865	386	374	758	535	1	0	288	0	0	12	8	1	0	0	0	0	1,869	11	7		
1866	423	408	831	520	12	0	111	0	0	379	10	0	0	0	0	0	1,869	11	7		
1867	412	400	812	562	12	0	996	11	0	288	0	0	0	0	0	0	1,869	11	7		
1868	464	524	988	580	10	0	262	8	0	249	9	4	159	14	11	428	8	0	1,869	11	7
1869	3575	3985	7560	5931	12	0	1,914	10	0	9,629	15	3	534	14	9	982	2	0	1,869	11	7
1870	357	399	756	599	3	2	191	9	1	2,622	19	6	534	13	6	98	4	2	1,869	11	7
1871	464	647	1,111	647	10	0	339	2	0	234	17	9	682	9	10	156	9	0	1,869	11	7
1872	484	623	1,107	626	13	0	210	12	0	254	14	0	715	16	0	145	8	0	1,869	11	7
1873	452	626	1,078	646	13	0	192	8	0	233	13	0	50	0	0	0	1,869	11	7		
1874	433	686	1,119	652	7	0	1,479	12	0	269	19	0	290	0	0	0	1,869	11	7		
1875	416	635	1,051	686	1	0	1,391	2	0	262	5	11	371	0	0	0	1,869	11	7		
1876	443	660	1,103	716	15	0	242	19	6	273	7	11	410	16	0	0	1,869	11	7		
1877	394	596	990	775	0	0	425	3	0	280	0	0	46	15	5	161	7	0	1,869	11	7
1878	466	638	1,104	839	1	0	222	7	0	340	9	8	1069	6	10	194	2	0	1,869	11	7
1879	417	466	883	411	0	0	811	0	0	517	17	6	119	3	4	0	1,869	11	7		
1880	592	583	1,175	816	13	0	459	13	11	420	9	8	1,040	17	10	283	6	0	1,869	11	7
1881	626	1,077	1,703	1,179	18	0	545	15	0	2,907	10	5	893	2	4	1,637	17	6	1,869	11	7
1882	451	626	1,077	719	19	10	545	15	0	290	15	1	893	3	0	1,637	15	9	1,869	11	7
1883	451	626	1,077	719	19	10	545	15	0	290	15	1	893	3	0	1,637	15	9	1,869	11	7

1. Includes £36 15s. Proceeds of Sale of Anniversary Dinner Tickets.
2. Includes £48 11s. Balance transferred from Building Fund.
3. Includes a Special Donation of £1,000.
4. Includes a Special Donation of £1,000.
Hospital Sunday Fund commenced this year.

TABLE—continued.

NO. OF PATIENTS.		INCOME.												EXPENDITURE.			
		In-Pa. Hous.	Out-Pa. Hous.	Total.	Annual Subscriptions.	Donations and Awards Saturday Fund.	Dividends, Rents, &c.	Legacies.	Pupils' Fees.	Proceeds of Hospital and Awards Sunday Fund.	Portions' Payments.	Other.	Total.	Ordinary.	Extraordinary—Building, &c.	Total.	
1879	1333	735	1068	800 18 0	682 12 0	429 10 7	43 10 9	412 5 0	175 6 3	5 5 0	4 15 4	2548 17 11	3292 2 2	913 12 0	4205 14 2		
1880	602	712	1334	827 18 0	558 13 0	385 13 1	856 9 8	1311 1 0	256 13 4	5 5 0	15 6 1	3360 9 6	4579 9 9	185 2 5	4764 12 2		
1881	669	683	1352	849 4 6	771 14 0	320 10 6	856 9 8	1975 15 0	337 10 0	5 5 0	41 5 10	5157 14 6	4275 1 9	...	4275 1 9		
1882	692	700	1472	873 5 0	839 9 0	352 12 6	450 2 4	281 10 0	281 10 0	15 15 0	62 6 7	4781 15 7	4553 2 11	200 0 0	4753 2 11		
1883	663	827	1490	988 1 0	952 12 4	359 12 6	234 0 0	2020 11 1	247 10 0	5 5 0	49 10 11	4857 12 7	4761 15 9	...	4761 15 9		
1884	779	884	1655	1057 8 0	775 15 4	361 2 10	...	2171 15 6	210 0 0	39 12 0	44 5 11	4659 19 7	4698 10 1	...	4698 10 1		
Totals	3734	4601	8335	5397 14 6	4580 15 5	2209 2 10	1584 0 5	9797 9 11	1508 4 7	71 2 0	217 10 8	25365 19 6	26160 2 5	1298 14 5	27458 16 10		
Ann. Avg.	622	767	1389	899 12 5	763 9 3	368 3 8	264 0 1	1632 18 4	251 7 5	11 17 0	36 5 1	4227 13 3	4360 0 5	216 9 1	4576 9 6		

SUMMARY

OF THE ANNUAL AVERAGES FOR THE SEVEN DECENNIAL PERIODS, 1809—1878,
AND FOR THE SIX YEARS, 1879—1884.

1809-18	140	119	259	518 10 7	285 9 5	46 10 0	35 0 0	8 1 8	109 14 0	...	6 5 8	1009 11 4	831 6 1	...	831 6 1
1819-28	176	231	467	458 10 9	359 6 0	111 4 4	246 12 3	23 14 7	47 4 7	...	0 12 2	1283 6 3	856 12 1	192 10 6	1049 2 7
1829-38	197	327	524	395 7 11	196 6 0	143 5 6	79 10 0	...	21 4 6	...	8 1 4	844 5 3	852 1 5	77 14 8	929 16 1
1839-48	191	306	497	414 10 0	140 1 0	142 1 8	111 8 9	...	4 3 4	...	28 10 7	800 19 2	786 16 5	51 6 4	838 2 6
1849-58	191	226	417	406 7 1	169 1 0	141 16 1	331 2 6	36 0 0	...	...	9 13 4	1107 10 7	795 2 11	301 4 10	1086 7 9
1859-68	357	359	796	529 14 2	193 6 1	269 19 6	534 13 6	98 4 2	11 13 2	...	15 18 11	1644 1 6	1301 18 9	179 0 2	1480 18 11
1869-78	451	626	1077	577 15 10	545 12 0	290 15 1	893 0 3	163 15 9	99 14 3	...	1 3 1	2712 3 3	2012 14 9	140 0 0	2152 14 9
1879-84	622	767	1389	899 12 5	763 9 3	368 3 8	264 0 1	1632 18 4	251 7 5	11 17 0	36 5 1	4227 13 3	4360 0 5	216 9 1	4576 9 6

LIST OF PHYSICIANS AND SURGEONS
OF QUEEN CHARLOTTE'S LYING-IN HOSPITAL,
from its Re-constitution in 1809.

Consulting Physicians.

1. Dr. THOMAS DENMAN	1809—1811
2. Dr. EDWIN GODDEN JONES	1811—1823
3. Dr. PETER M. ROGET, F.R.S.	1817—1869
4. Dr. JAMES COLLAND	1823—1849
Dr. JOSEPH MOORE	1849—1856
Dr. G. OWEN REES, F.R.S.	1869
Dr. G. THOMPSON GREAM	1872
Dr. C. BLAKELEY BROWN	1872—1884
Dr. G. BERNARD BRODIE	1873

Physicians.

5. Dr. DE COURCY LAFFAN	1809—1811
Dr. ANDREW THYNNE	1811—1813
Dr. DAVID D. DAVIS	1814—1824
Dr. R. BYAM DENNISON	1823—1833
Dr. J. ASHBURNER	1833—1849
Dr. C. BLAKELEY BROWN	1849—1871
Dr. METCALFE BABINGTON	1850—1852
Dr. F. W. MACKENZIE	1862—1865
Dr. G. BERNARD BRODIE	1865—1873
Dr. WILLIAM HOPE	1871
Dr. W. CHAPMAN GRIGG	1873

Medical Officers for Out-Patients.

Mr. JOSEPH CHOLMONDELEY	1836—1870
Dr. G. BERNARD BRODIE	1863—1865
Dr. PARSON	1865—1869
Dr. WILLIAM HOPE	1869—1870
Dr. W. CHAPMAN GRIGG	1871—1873
Dr. WILLIAMS	1873—1876
Dr. CHAMFENEYS	1876—1880
Dr. PERCY BOULTON	1880—1882

Consulting Surgeons.

(Office instituted 1856.)

Mr. CHARLES HAWKINS	1856—1866
Mr. HENRY LEE	1867
Sir WILLIAM MACCORMAC	1883

Surgeons.

6. Mr. CHARLES M. CLARKE	1809—1820
Mr. CHARLES HERBERT	1814—1817
Mr. RICHARD BLADGEN	1817—1826
Mr. T. A. STONE	1820—1822
7. Mr. C. LOCOCK	1822—1823
Mr. J. SWEATHAM	1826—1840
Mr. JOSEPH CHOLMONDELEY	1823—1856
Mr. G. THOMPSON GREAM	1840—1850

Resident Medical Officers.

(Office instituted 1873.)

H. CRIPPS LAWRENCE, L.R.C.P., M.R.C.S.	1873
R. GARDINER, M.D. (Edin.)	1873
PHILIP ADDIS, L.R.C.P., M.R.C.S.	1873
H. DUNSTAN, M.R.C.S., L.S.A.	1873—1874
HENRY CHARLES LANG, M.R.C.S.	1874
WILLIAM BEATSON, L.R.C.P., M.R.C.S.	1874—1875
D. L. BECKINGDALE, M.D. (Edin.)	1875
F. W. STRUGNELL, L.R.C.P., M.R.C.S.	1875—1876
S. H. FISHER, L.R.C.P., M.R.C.S.	1877
B. H. J. GARDINER, M.R.C.S., L.S.A.	1877—1879
T. LLOYD BROWN, M.R.C.S., L.S.A.	1879—1880
NORMAN DALTON, M.B. (London)	1880—1881
C. E. BADDELEY, M.B. (London)	1881
ROLPH LESSLIE, M.A., M.D. (Toronto)	1881—1882
W. H. QUICKE, M.R.C.S., L.S.A.	1882—1883
H. L. P. HARDY, M.R.C.S., L.S.A.	1883
LEONARD W. BICKLE, L.R.C.P., M.R.C.S.	1883
PERCY EDGELOW, M.R.C.S., L.R.C.P. (Edin.)	1883—1884
J. B. WOOLBY, M.B. (London)	1884
ST. CLAIR THOMPSON, M.B. (London)	1884
HUGH R. BEEVOR, M.B. (London)	1884
C. NEWTON CORNISH, M.R.C.S., L.R.C.P. (Edin.)	1885

1. First Licentiate in Midwifery of the Royal College of Physicians, and the father of Lord Chief Justice Denman.
2. Physician to H.R.H. the Duke of York.
3. Author of "A Thesaurus of English Words and Phrases," &c., &c.
4. Author of "A Dictionary of Practical Medicine," &c., &c.
5. Afterwards Sir Joseph De Courcy Laffan, M.D.
6. Afterwards Sir C. M. Clarke, Bart., M.D.
7. Afterwards Sir Charles Locock, Bart.

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